SOUTHWEST HEATING & A/C RT. 2 BOX 433B PENNINGTON GAP, VA 24277 (276) 546-5153

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

DEDGOMAN DIEGODA (A	TOW.							
PERSONAL INFORMATI	<u>ION</u>			DATE.				
NAME:		<u>DATE:</u> SSN:						
TVIIVIE.			DDI1.					
LAST	FIR	ST	MI					
PRESENTADDRESS:								
-	STREET	CITY	STATE	ZIP				
PERMANENT ADDRESS:								
	STREET	CITY	STATE	ZIP				
PHONE NO:				S OR OLDER? YES□ NO□				
POSITION_APPLIED FOR:		DATE Y	OU CAN START	SALARY DESIRED				
ADE VOLLEMBI OVEED N		ZWE MOLUDE VOLE	DECENT EMPLOYED					
ARE YOU EMPLOYEED N	OW? (IF SO MA)	WE INQUIRE YOUR	R PRESENT EMPLOYER)					
HAVE YOU EVER APPLIED FOR THIS COMPANY BEFORE? WHEN?								
INIVE TOO EVERTHIELE	DIOR TIME COL	MITHINI BELORE:		WILLIA.				
REFERRED BY								
ARE YOU PREVENTED FF								
IN THIS COUNTRY BECA	<u>USE OF VISA OR</u>	IMMIGRATION STA	TUS ? YES \square NO					
			-0					
HAVE YOU EVER BEEN CON			E? YES □ NO □					
ARE YOU WILLING TO TA	AKE A DRUG TE	ST IF REQUIRED?						
	GEGG A WALLD D							
DO YOU CURRENTLY PO	SESS A VALID L	PRIVERS LICENSE? _						
HAVE VOLUHAD ANY TR	AFFIC VIOLATIO	ONS IN THE PAST 3 V	YEARS? (IF SO PLEASE LIST)					
HAVE TOO HAD ANT TR	ATTIC VIOLATIO	JNS IN THE LAST 5 1	EARS: (II SO I LEASE LIST					
GENERAL SKILLS								
SPECIAL SKILLS:								
U.S.MILITARY OR	PRESENT MEMBERSHIP IN							
NAVAL SERVICE	RANK NATIONAL GUARD OR RESERVES							
	NAME AND	NO OF YEARS						
EDUCATION	LOCATION	ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED				
	OF SCHOOL							
GRAMMER SCHOOL								
GIGHVINIZI SCITO CE								
HIGH SCHOOL								
HIGH SCHOOL								
COLLEGE								
COLLEGE								
TRADE, BUSINESS OR								
CORRESPONDENCE								
SCHOOL								

FORMER EMPLOYERS (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH MOST RECENT FIRST)

DATE			<u> </u>						
DATE	NAME AND ADDRESS								
MONTH AND	OF EMPLOYER		SALARY	POSITION	REASON FOR LEAVING				
YEAR									
FROM									
TO									
FROM									
TO									
FROM									
TO									
FROM									
TO									
<u>WHICH OF THESE JOB</u>									
WHAT DID YOU LIKE	MOST ABO	OUT THIS JOB?							
REFERENCES: GIVE THE	E NAMES OF TI	HREE PERSONS NOT	RELATED TO YO	<u>OU WHOM YOU HA</u>	VE KNOWN FOR AT LEAST ONE YEAR				
NAME		ADDRESS		PHONE	YEARS ACQUAINTED				
1					Acquainted				
2									
3	3								
DI GAGE OF									
IN CASE OF EMEREGENCY NOTIFY									
NAME ADDRESS PHONE NO.									
"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT. HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING." DONOT WRITE BELOW THIS LINE INTERVIEWED BY DATE									
REMARKS:									
NEATNESS_				ABIL	ITY				
	□NO	POSI			DEPT.				
SALARY/WAGE_			DAT	E REPORTIN	G TO WORK				
APPROVED:1.			2.		3.				
EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER THIS FORM HAS BEEN DESIGNED TO STRICTLY COMPLY WITH STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS PROHIBITING EMPLOYMENT DISCRIMINATION.									