



Application for Apprenticeship

Date of Application: _____

Personal Information:

Name: _____
Last First MI

Current Address: _____
Street
City State Zip

Telephone: _____
Home Alternate

Email: _____

Employment Desired:

Position: _____

Available Start Date: _____

Days and Hours Available: _____

How Did You Hear About Us: _____ Newspaper _____ Walk-In _____ Referral

Other: _____

This company is an equal opportunity employer. All applicants will be considered without regard to race, age, color, national origin, religion, disability, sexual orientation, or other protected status in accordance with applicable federal and state equal employment opportunity laws. Bud's Plumbing, Heating & Air Conditioning will strive to accommodate any physical and/or mental limitations of employees and/or applicants in order to accomplish the essential functions of the job requested.

Please read and initial the following statements before continuing on to the remainder of this application.

I certify that all answers and statements I have made on this application are true and complete without omissions. I understand that any false information will be grounds for refusal of employment or for immediate termination if employment is offered. I authorize the investigation of any information contained herein. _____
Initials

If hired, I understand that it will be my responsibility to read and familiarize myself with all rules, regulations and policies of Bud's Plumbing, Heating & Air Conditioning as they exist currently or will be later amended. _____
Initials

I also understand that if hired, my employment can be terminated at any time, without notice, at the discretion of Bud's Plumbing, Heating & Air Conditioning. _____
Initials

I consent to and authorize the Company to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference. _____
Initials

I understand I may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation or take a pre-employment drug test. If I am offered employment or start work before any required test is completed, I understand that my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results and of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document. I agree to sign any additional forms necessary for pre-employment checks and/or tests to be conducted.

I understand that this application is not an offer of employment. _____
Initials

Signature of Applicant: _____ Date: _____

This application is valid for 90 days from the date signed. For consideration of employment after the 90 days, a new application must be submitted.

- | | | |
|--|-----|----|
| 1.) Are you at least 18 years or older? | YES | NO |
| 2.) Have you ever filed an application with Bud's Plumbing, Heating & Air Conditioning before? | YES | NO |
| 3.) Are you currently employed? | YES | NO |
| 4.) Are you legally authorized to work in the United States on a full-time basis? | YES | NO |
| 5.) Have you ever been convicted of a felony? | YES | NO |

If yes, please explain: _____

- | | | |
|---|-----|----|
| 6.) Do you have any relatives currently employed at Bud's Plumbing, Heating & Air Conditioning? | YES | NO |
|---|-----|----|

Educational History:

Please list your educational background, starting with the most recent.

Type of School: _____ Name of School: _____
 Location: _____ # of Years Completed: _____ Degree Completed: _____

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 Location: _____ # of Years Completed: _____ Degree Completed: _____

Employment History:

Please list your employment background, starting with the most recent. Please include all gaps in employment.

Employer:

Phone:

Your Last Position Held:

Ending Salary:

Location (City, State):

Supervisor's Name:

Reason for Leaving:

Employed From (MM/YY – MM/YY):

Employer:

Phone:

Your Last Position Held:

Ending Salary:

Location (City, State):

Supervisor's Name:

Reason for Leaving:

Employed From (MM/YY – MM/YY):

Employer:

Phone:

Your Last Position Held:

Ending Salary:

Location (City, State):

Supervisor's Name:

Reason for Leaving:

Employed From (MM/YY – MM/YY):

Please List Professional References:

Name	Occupation	Years Known	Phone #

Please List Personal References:

Name	Relation	Years Known	Phone #

Specialized Skills:

Please list any specialized skills, training, certifications, and licenses pertinent to the position for which you are applying:
