



**EMPLOYMENT APPLICATION**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

If you have used a different name for school or work in the past, please list it: \_\_\_\_\_

Do you have a valid driver's license?  Yes  No

Are you currently eligible to work in the United States?  Yes  No

Have you previously worked for Clear Air Enviro-Services? If yes, includes dates and details.  Yes  No

From \_\_\_\_\_ to \_\_\_\_\_ in the position of \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Do you have any family members working at Clear Air Enviro-Services  Yes  No

If so, give name \_\_\_\_\_

Have you ever been convicted of a crime? If yes, include date(s) and details.  Yes  No

Note: A criminal record will not automatically disqualify you from employment. The nature and date of the offense(s) will be considered and evaluate its relation to the job requirements only, and only to the extent of the law.

**POSITION DESIRED**

Position: \_\_\_\_\_ Start Date: \_\_\_\_\_ Pay Rate: \_\_\_\_\_

Employment Desired:  Full-Time  Part-Time  Seasonal  Other: \_\_\_\_\_

Days available to work: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Available to work:  Overtime  Weekends  Holidays  Nights

How did you learn about this opening? \_\_\_\_\_

**EDUCATION**

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education, training, or certifications:		

Are you comfortable using computers, laptops, smart phones, or tablets?  Yes  No

What computer software or programs are you familiar with? \_\_\_\_\_

## MILITARY EXPERIENCE

Branch of Service:	Dates Served:	Rank at Discharge:
Other education, training, or certifications:		

## WORK EXPERIENCE

Please list your most recent work experience. You may attach another page if needed.			
Employer:		Address:	
Start Date:	End Date:	Starting Pay:	Ending Pay:
Position Held:		Reason for Leaving:	
Supervisor's Name and Title:		Supervisor's Phone Number:	
Description of Duties:			
Employer:		Address:	
Start Date:	End Date:	Starting Pay:	Ending Pay:
Position Held:		Reason for Leaving:	
Supervisor's Name and Title:		Supervisor's Phone Number:	
Description of Duties:			

## AUTHORIZATION AND ACKNOWLEDGEMENTS

I certify that the information in this application is true and complete. I understand that false information may be grounds for rejection of my application or for termination from the company if I am hired.

I authorize the verification of any information above. I permit the company to check and verify my references, record of employment, education record, and any other information I have provided.

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date