



Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date	
Last Name, First, MI	
Birth Date	
Street Address	
City, State, Zip	
Primary Phone	Alternate Phone

Position Applied For	
How did you hear of this opening?	
Earliest Start Date	Desired Wage (\$)

Are you a citizen of the U.S. or are otherwise authorized to work in the United States on an unrestricted basis?*

* Documentation may be required.

Are you seeking full-time or part-time employment? <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	Are you willing to work swing shift? <input type="checkbox"/> Yes <input type="checkbox"/> No
Available Hours	Are you willing to work graveyard shift? <input type="checkbox"/> Yes <input type="checkbox"/> No

Have you ever been convicted of a felony? (This does not necessarily affect your application.)
If yes, please describe.

School Name & Location	Grad Year	Degree	Major
High School			
College			
College			
Post-College			
Other Training			

List any other skills, qualifications, or related experience (excluding work history)

Do you possess any of the following:

Electrical Contractor Experience <input type="checkbox"/> Yes <input type="checkbox"/> No	CDL Experience <input type="checkbox"/> Yes <input type="checkbox"/> No	Fork Lift Certification <input type="checkbox"/> Yes <input type="checkbox"/> No
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Please attach any other work-related training not listed above.

List Employment History below, beginning with **your most recent employer**.

Company Name		
Address		Phone
Start Date	Position	Start Wage (\$)
End Date	Position	End Wage (\$)
Supervisor's Name		May we contact?
List general responsibilities		
Reason for leaving		

Company Name		
Address		Phone
Start Date	Position	Start Wage (\$)
End Date	Position	End Wage (\$)
Supervisor's Name		May we contact?
List general responsibilities		
Reason for leaving		

Company Name		
Address		Phone
Start Date	Position	Start Wage (\$)
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Company Name		
Address		Phone
Start Date	Position	Start Wage (\$)
End Date	Position	End Wage (\$)
Supervisor's Name		May we contact?
List general responsibilities		
Reason for leaving		

Attach additional employers or other information as necessary.

251 S Blue Mounds St, Mt Horeb, WI 53719 | 608-437-5531 | Please return to E&S office.

Acknowledgement Agreement

I, _____, certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature	Date
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