

## **INTERN APPLICATION**

## I. Personal Information

Nickname:			
Street Address:			
City:	State:	Zip C	ode:
Home Phone: ()	(	Cell Phone: ()	
Email Address:			
Social Security Number			
Driver's License Number:			
Have you ever applied for sec Yes No	urity clearance?	If so, did you pass? Yes No_	
Do you still possess those clear Yes No	nrances? Specify und	der "Skills" below.	
•	. ,		ed States?
Yes No  If hired, can you provide proo	. ,		ed States?
Yes No  If hired, can you provide proo Yes No	f that you are legally	y able to work in the Unit	_ Walk-In
Yes No  If hired, can you provide proo Yes No  How were you referred to us? Advertisement Reference.	f that you are legally ferral E	y able to work in the Unit Employment Agency se (felony or misdemeand	_ Walk-In
Yes No  If hired, can you provide proo Yes No  How were you referred to us? Advertisement Refe Other (Specify)  Have you ever been convicted	f that you are legally ferral E	y able to work in the Unit Employment Agency se (felony or misdemeand	_ Walk-In
Yes No  If hired, can you provide proo Yes No  How were you referred to us?  Advertisement Reference Control Reference Con	f that you are legally ferral E	y able to work in the Unit Employment Agency se (felony or misdemeand	_ Walk-In or)? Note: An affirmative answer



I.	Employment
•	Position Desired:
•	Salary Desired:
•	Are you available to work overtime if necessary?
	Yes No
•	Are you over 18 years of age?
	Yes No
•	When are you available to begin work? (Date)
•	What days and hours are you available for work?
	Are you able to perform the essential functions of the job for which you are applying? Note: We comply with the Americans with Disabilities Act and will consider reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions:  Yes No
	Skills
	Are you able to operate a personal computer and/or other field equipment/machinery?  Yes No
	If yes, what types of computer software and/or machinery you have proficiency in?



E	ducation  High School or Trade School
	Name & City of School:
	Number of Years Completed:
	Did you graduate? If no, when do you expect to graduate? With what certif./degree?  Yes No
	Degree(s) or Diploma(s):
	Major Field(s) of Study:
	College or University
	Name & City of School:  Number of Years Completed:
	Did you graduate? If no, when do you expect to graduate? With what certif./degree?



## V. Employment History

Please account for all employment within the last seven (7) years, beginning with your current or more recent employer.

Positions Held	
Company Name:	
Company Address:	
Company Telephone Number: ()	
Dates Employed: From:	To:
Salary: Ho	ours and Days Worked:
Job Title:	
Supervisor & Direct Contact #:	
Is this your current employer? Mayes No Yes Yes_	ay we contact this employer? es No
Specific Job Duties:	
Reason for Leaving:	
Positions Held	
Company Name:	
Company Address:	
Company Telephone Number: ()	
Dates Employed: From:	То:



	Salary:	Hours and Days Worked:
	Job Title:	
	Supervisor & Direct Contact #:	
	Is this your current employer? Yes No	May we contact this employer? Yes No
	Specific Job Duties:	
	Reason for Leaving:	
ı	Positions Held	
	Company Name:	
	Company Address:	
	Telephone Number: ()	
	Dates Employed: From:	To:
	Salary:	Hours and Days Worked:
	Job Title:	
	Supervisor & Direct Contact #:	
	Is this your current employer? Yes No	May we contact this employer? Yes No



	Specific Job Duties:
	Reason for Leaving:
	Military Service
•	Have you obtained any special skills or abilities as the result of services in the military?  Yes No
	If yes, please describe skills & job duties:
	Status of military discharge:
	Key Information
	Provide any additional information that you feel HJD Capital Electric, Inc. staff might find
	Important as it relates to your character, career goals, education or other.
•	Personal References
	Please list at least two (2) persons NOT related to you who have known you for at least five (5)
	years.
•	Name of Reference #1:
•	Address:
•	Telephone Number: ()
•	Name of Reference #2:
•	Address:
	Telephone Number: ( )



(Initial each numbered item as read)

1.	The information that I have provided on this application is accurate to the best of my knowledge and may be verified by HJD Capital Electric, Inc. or its agents.
2.	I authorize all the schools, persons and organizations named in this application to provide any relevant information in their possession or knowledge to the agents of HJD Capital Electric, Inc., for use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release HJD Capital Electric, Inc., my former employers and all other persons from any and all claims, demands, or liabilities arising out of or in any way related to such inquiry or disclosure.
3.	I understand that HJD Capital Electric, Inc. is committed to maintaining a drug and alcohol free work place. Accordingly, I may be subject to a pre-employment blood test, urinalysis or other drug/alcohol screening. I further understand that if employed, I may be subject to such a drug and alcohol screening if the HJD Capital Electric, Inc. has reasonable suspicion to believe that I am under the influence of a drug or alcohol. My consent to submit to such a test is required as a condition of employment and my refusal to consent shall result in a refusal to hire or, if already employed, termination.
4.	I understand and agree that any misrepresentation or omission of facts in this application will be justification for refusal or termination of employment, regardless of the time elapsed before discovery.
5.	I understand and agree that the employment for which I am applying for is at-will and such employment may be terminated at any time with or without cause, without prior notice, by either myself or HJD Capital Electric, Inc There will be no agreement, express or implied between HJD Capital Electric, Inc. and me for any specific period of employment, nor for continuing or long term employment, unless made in writing, signed by an authorized representative of HJD Capital Electric, Inc
6.	I have placed my signature in the space provided below only after I have completed the entire application to the best of my ability and have carefully read the statements above.
Αp	pplicant Printed Name:
Ar	oplicant Signature: Date: