

Natchez Heating & Cooling Inc.

152 Homochitto Street

Natchez, MS 39120

(601) 442-5593

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

POSITION APPLIED FOR _____ DATE OF APPLICATION _____

NAME: _____ DATE OF BIRTH _____

ADDRESS _____

TELEPHONE NO. () _____ SOCIAL SECURITY NO: _____

EMPLOYMENT HISTORY

LIST YOUR LAST THREE (3) EMPLOYERS STARTING WITH THE MOST RECENT, INCLUDING MILITARY. EXPLAIN ANY GAPS IN EMPLOYMENT IN THE COMMENTS SECTION BELOW.

EMPLOYER _____ TELEPHONE () _____

ADDRESS _____

JOB TITLE _____ SALARY _____

DATES EMPLOYED _____ DUTIES _____

REASON FOR LEAVING _____

MAY WE CONTACT FOR REFERENCES YES NO

EMPLOYER _____ TELEPHONE () _____

ADDRESS _____

JOB TITLE _____ SALARY _____

DATES EMPLOYED _____ DUTIES _____

REASON FOR LEAVING _____

MAY WE CONTACT FOR REFERENCES YES NO

EMPLOYER _____ TELEPHONE () _____

ADDRESS _____

JOB TITLE _____ SALARY _____

DATES EMPLOYED _____ DUTIES _____

REASON FOR LEAVING _____

EDUCATION

LAST GRADE COMPLETED 8 9 10 11 12 SCHOOL _____

COLLEGE OR TRADE GRADUATE? YES NO DEGREE _____

SCHOOL _____

REFERENCES

LIST NAME AND TELEPHONE NUMBER OF THREE WORK / SCHOOL REFERENCES WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS SUPERVISORS.

NAME	TELEPHONE NUMBER	YEARS KNOWN

HAVE YOU EVER BEEN EMPLOYED OR FILED AN APPLICATION HERE BEFORE? YES NO
IF YES, WHEN? _____ HOW DID YOUR FIND OUT ABOUT THIS JOB? _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THIS COUNTRY? YES NO

DATE AVAILABLE FOR WORK? _____ DESIRED PAY _____

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other person, corporations, or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, and federal law.

The employer is a Drug Free workplace and I agree to participate in any mandatory or random drug testing. I understand that any positive test will result in my immediate termination.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

SIGNATURE OF APPLICANT _____ DATE _____

EEO/V/D