WestAIR
HEATING & COOLING

11184 River Road NE, Hanover, MN 55341 ~ 763.498.8071

# EMPLOYMENT / JOB APPLICATION

## PERSONAL INFORMATION

**FULL NAME:** _____ **DATE:**_____
First Middle Last

**ADDRESS:** _____
Street Address Apt/Suite

_____
City State Zip Code

**E-MAIL:** _____ **PHONE:** _____

**DESIRED PAY**: $_____ **HOW DID YOU HEAR ABOUT US?**_____

**HAVE YOU APPLIED FOR EMPLOYMENT WITH US BEFORE?** ☐ NO ☐ YES (WHEN?) _____

**POSITION APPLIED FOR:** _____

**EMPLOYMENT DESIRED:** ☐ FULL-TIME ☐ PART-TIME

## EMPLOYMENT ELIGIBILITY

**ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S?** ☐ YES ☐ NO*

**WHEN ARE YOU ABLE TO BEGIN WORK (MONTH/YEAR)?** _____/_____

**ARE YOU 18 OR OLDER?** ☐ YES ☐ NO

**DO YOU HAVE ANY SPECIAL TRAINING SKILLS (HVAC Certifications, Computer Software Knowledge, Machine Operation Experience ETC.)?**

_____

## EDUCATION

**HIGH SCHOOL:** _____ CITY / STATE: _____

FROM: _____ TO: _____ GRADUATE? ☐ YES ☐ NO

**COLLEGE:** _____ CITY / STATE: _____

GRADUATE? ☐ YES ☐ NO: YEARS COMPLETED? _____ DEGREE: _____

## PREVIOUS EMPLOYMENT

**EMPLOYER 1: Company/Individual**_____

LOCATION (CITY/STATE): _____ PHONE: _____

NAME OF SUPERVISOR: _____

JOB TITLE: _____ FROM: _____ TO: _____

RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO *IF NO, WHY NOT?_____

**EMPLOYER 2: Company/Individual**_____

LOCATION (CITY/STATE): _____ PHONE: _____

NAME OF SUPERVISOR: _____

JOB TITLE: _____ FROM: _____ TO: _____

RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO *IF NO, WHY NOT?_____

**EMPLOYER 3: Company/Individual**_____

LOCATION (CITY/STATE): _____ PHONE: _____

NAME OF SUPERVISOR: _____

JOB TITLE: _____ FROM: _____ TO: _____

RESPONSIBILITIES: _____

REASON FOR LEAVING: _____MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO *IF NO, WHY NOT?

## AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I declare that the information provided by me in this application is true, correct, and complete to the best of my knowledge. I understand that if employed, any falsification, misstatement, or omission of fact in connection with my application, whether on this document or not, may result in immediate termination of employment. I authorize you to verify all the information provided above.

I acknowledge that if I become employed, I will be free to terminate my employment at any time for any reason, and West Air Inc. retains the same rights. Employment will be on an at-will basis. No West Air Inc. representative has the authority to make any contrary agreement.

I agree to submit to drug and alcohol testing. If requested by West Air Inc. I release West Air Inc. and its employees, plus other persons or companies, from and all liability arising out of or related in any way to such testing.

I authorize West Air Inc. to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release West Air Inc. and its employees from and all liability arising from such investigation.

**SIGNATURE** _____ **DATE** _____

**PRINT NAME** _____

## DISCLOSURE AND AUTHORIZATION TO RELEASE INFORMATION

I am aware that a consumer report, including motor vehicle records may be obtained on me in the course of consideration for employment at times throughout my employment.

I authorize West Air Inc., without reservation, any party, state, or agency contacted to furnish the above mentioned information.

I hereby authorize procurement of consumer report(s). If hired (or contacted), this authorization shall remain on file and serve as an ongoing authorization for you to procure consumer reports at any time during employment (or contact) period.

NAME _____

**ADDRESS**_____

**CITY, STATE, ZIP**_____

**SOCIAL SECURITY #**_____**DATE OF BIRTH**_____

**DRIVERS LICENSE #**_____**STATE OF DL ISSUE**_____

SIGNATURE _____DATE_____