APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

PERSONAL INFORMATION

Name					
Last	Fi	First		Middle	
Present Address					
Street		City	State	Zip	
Address					
Street		City	State	Zip	
Phone No.		•	18 years or older? Yes	No	
Personal Email address					
Describe any U.S. Military Service: branch, rank, nature and date of discharge	2.				
EMPLOYMENT DESIRED Position	Date you can start		Salary desired		
Are you employed now?		ue inquire of your n			
Have you ever applied to this	II so, Illay	we inquire of your p			
Company before?	Where?		When?		
Have you ever worked for this Company or the Huizenga Manufactu		Whe			
When?					
Relatives employed by Company? Yes_	Who?		No		

Do you have any activities, commitments or responsibilities (for example, school, other employment, etc.) that might interfere with your ability to work full time, including overtime, in the position for which you are applying? If so, explain.

FORMER EMPLOYMENT - List below last four employers, starting with the most recent.

Date	Name and			Reason for
(Month & Year)	Address of Employer	Salary	Position	Leaving
From				
То				
From	_			
То				
From				
То				
From				
То				

Parkway verifies that the payroll taxes deducted from your paycheck and the matching amount forwarded by Parkway on your behalf is credited to your account. A requirement of employment is to provide a verifiable Social Security Number prior to your first paycheck.

Describe fully the nature of the work in your present (or most recent) job.____

Which of your jobs did you like best?_____

Why?___

What special skills or knowledge do you have that will aid you in qualifying for employment?

EDUCATION	NAME AND LOCATION	NUMBER OF YEARS	DID YOU	SUBJECTS
	OF SCHOOL	ATTENDED	GRADUATE?	STUDIED
High School				
College				
Trade, Business or				
Correspondence School				
Subjects of Special Study				
or Research Work				
REFERENCES - Give the name	as of three persons not related t	o vou whom vou have	known at least one year	
	ies of three persons, not related t	o you, whom you have	known at least one year.	Years
Name	Address Busin	ess	Phone	Acquainted
In case of emergency notify:				
Name	Address		Pho	ne No.

SUPPLEMENT 1

READ CAREFULLY AND SIGN BELOW IF YOU AGREE TO THESE TERMS OF EMPLOYMENT

If my employment is covered by the Collective Bargaining Agreement between the Company and the Christian Labor Association, I understand that my employment is subject to a probationary period. If my employment is not covered by the Collective Bargaining Agreement, then any employment is on an at-will basis.

I agree that the contents of any office, locker, desk or equipment or other Company property I may use (including Company vehicles) may be inspected by the Company at any time, and I waive any claims against the Company or its agents relating to such inspection.

I agree to submit to medical examinations permitted by law before employment.

I agree to be bound by the Company's Employee Handbook to the extent the provisions of the Employee Handbook do not conflict with the terms of the Collective Bargaining Agreement negotiated between the Company and the Christian Labor Association.

I understand that, from time-to-time, the Company may need to clarify, amend and/or supplement the information contained in the Employee Handbook and the Company will inform me when changes occur.

Applicant's Signature:

Date: _____

Fair Credit Reporting Act Notice and Authorization

Notice

In order for Parkway Electric & Communications, LLC ("Parkway") to evaluate me for possible employment, and if I am hired to make future decisions concerning my employment, Parkway may from time to time obtain consumer reports about me. A "consumer report" is a report that contains information about a person's credit characteristics, character, general reputation, personal characteristics and lifestyle, and which is used as a factor in establishing a person's eligibility for employment. A consumer report may include, but is not limited to, criminal background checks or motor vehicle or driving record reports obtained from a consumer reporting agency.

Authorization

I hereby authorize Parkway from time to time to obtain a consumer report about me for employment purposes. I understand that if my application is denied on the basis of the information contained in a consumer report or if an adverse action is taken against me regarding my employment based on information contained in a consumer report, Parkway will provide me with a copy of the report and description of my rights under the Fair Credit Reporting Act.

Date: _____

Signature

Print Name

Previous Name(s) Used

Social Security Number

Date of Birth

Email Address

15250930