

Commercial Appliance Service, Inc.
Employment Application



Applicant Information

Full Name:						Date:		
<i>Last</i>			<i>First</i>			<i>M.I.</i>		
Address:								
<i>Street Address</i>					<i>Apartment/Unit #</i>			
<i>City</i>					<i>State</i>		<i>ZIP Code</i>	
Phone:	()			E-mail Address:				
Date Available:			Social Security No.:				Desired Salary:	\$
Position Applied for:								
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?				
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>					
If yes, explain:								

Education

High School:				Address:				
From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
College:				Address:				
From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	
Other:				Address:				
From:		To:		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:	

References

Please list three professional references.

Full Name:				Relationship:			
Company:				Phone:		()	
Address:							
Full Name:				Relationship:			
Company:				Phone:		()	
Address:							
Full Name:				Relationship:			
Company:				Phone:		()	
Address:							

Previous Employment

Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	

May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	

May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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Company:				Phone:	()
Address:				Supervisor:	
Job Title:		Starting Salary:	\$	Ending Salary:	\$
Responsibilities:					
From:		To:		Reason for Leaving:	

May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
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Military Service

Branch:				From:		To:	
Rank at Discharge:			Type of Discharge:				
If other than honorable, explain:							

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:				Date:	
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** Due to the sensitive nature of this information. Please contact the appropriate department manager before sending application by mail, email, or fax.