



**EMPLOYMENT APPLICATION**

Doc Watts Electric, Inc considers all applicants for employment without regard to race, color, religion, sex, national origin, age, sexual orientation, handicap or disability in accordance with Federal laws prohibiting discrimination in employment.	<u>Date:</u> _____
<u>How were you referred to us:</u> _____	<u>Position Applied For:</u> _____

**Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Alt Phone:** \_\_\_\_\_

**City, Zip:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Salary Requirements:** \_\_\_\_\_

**Date Available to start:** \_\_\_\_\_

**Are you over the age of 18? Yes  No**

**If No, state your age:**

**Can you provide a work permit? Yes  No**

**Type of employment desired: Full-time:  Part-time:  Temporary**

**Have you ever been employed by Doc Watts Electric, Inc? Yes  No**

**If yes, when? \_\_\_\_\_**

**Are you legally allowed to work in the United State? Yes  No**

**Are you willing to work (as necessary)?**

**Overtime Yes  No**

**Weekends Yes  No**

**Are you willing and able to perform, in a reasonable and safe manner, all of the activities involved in the position for which you are applying? Yes  No**

**If No, please explain: \_\_\_\_\_**  
 \_\_\_\_\_

Have you ever pleaded guilty, no contest or been convicted of a crime? Yes  No

If yes, state the nature of offense, when, where and disposition: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Answering yes to these questions does not constitute an automatic rejection for employment. This information will be used for job-related purposes and only to the extent permitted by law.

Driver's License number (if applicable to position): \_\_\_\_\_ State: \_\_\_\_\_

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**EDUCATION:**

School: \_\_\_\_\_ Course of Study: \_\_\_\_\_

Did you graduate: Yes  No  Years completed: \_\_\_\_\_

Diploma or Degree Received: \_\_\_\_\_

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**SPECIAL SKILLS:**

Electrical Skills/Knowledge: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Construction Trades: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Heavy Equipment/Specialty Tool Proficiency: \_\_\_\_\_

Please describe why you are interested in working for our company and to list any other skills and abilities that you feel especially qualify you for a position with us.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**EMPLOYMENT HISTORY:** List in order, last or current employer first. Account for any gaps in your employment.

Employer Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Date Employed: From: \_\_\_\_\_

Rate of Pay: Starting: \_\_\_\_\_

To: \_\_\_\_\_

Ending: \_\_\_\_\_

**Position Held:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Duties:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**Employer Name:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Date Employed:**      **From:** \_\_\_\_\_

**Rate of Pay: Starting:** \_\_\_\_\_

**To:** \_\_\_\_\_

**Ending:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Duties:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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**Employer Name:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Supervisor:** \_\_\_\_\_

**Date Employed:**      **From:** \_\_\_\_\_

**Rate of Pay: Starting:** \_\_\_\_\_

**To:** \_\_\_\_\_

**Ending:** \_\_\_\_\_

**Position Held:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**Duties:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

If you need more room to complete you prior work history, please use the back of this page or additional sheets of paper.

**REFERENCES:**

**1. Name:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Years Known:** \_\_\_\_\_

**2. Name:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

Address: \_\_\_\_\_

Years Known: \_\_\_\_\_

3. Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Years Known: \_\_\_\_\_

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**IN CASE OF AN EMERGENCY, WHO SHOULD BE NOTIFIED?**

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

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**AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)**

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I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Doc Watts Electric, Inc. creates an actual or implied contract of employment. I understand that, if I accept employment with Doc Watts Electric, Inc., it will be at an at-will basis. This means that either Doc Watts Electric, Inc. or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

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

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

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

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Federal laws require that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with such laws, Doc Watts will verify the status of every individual offered employment with the company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as required by law to verify your identification and employment authorization upon employment.