## APPLICATION FOR EMPLOYMENT



## Tyler Heating, Air Conditioning, Refrigeration LLC

255 Hathaway Drive, Unit 1, Stratford, CT 06615

## **Equal Employment Opportunity Policy**

Tyler Heating, Air Conditioning, Refrigeration LLC is deeply committed to a policy of equal employment opportunity for all their job applicants and employees. We seek to employee qualified persons in all job classifications and to administer all personnel actions affecting our employees without discrimination on the basis of race, color, religion, sex, age, or national origin. Individuals with disability, disabled Veterans, and Veterans of the Vietnam era will be given the fullest consideration for employment in positions for which they are qualified. We also are committed to making reasonable accommodation to qualified individuals with a disability as well as abiding by any and all state and local laws, which, in addition to the above, prohibit discrimination in any form.

NAME OF APPLICANT:Position Applying For:					
Position Applying	) For:				
PERSONAL INFOR	MATION (Please Print)				
Name:	First Name, Middle Initial:	Social Security Number:	Cell Phone:		
sent Address, Apartment Number:		City, State, Zip:	Home Phone:		
w Long Have You Lived at This Address:		Email Address:	Email Address:		
ious Address if at Present A	ddress Less Than 3 Years:	City, State, Zip:	How Long Did You Live At 1 Address:		
Are you authorized t	to work without restrictions for any	Company in the United States?	YES 🔲 NO 🔲		
Are you 18 Years of a	age or older? YES 🔲 NO 🔲				
(If under 18 Years of ag	ge, applicant will be required to submit	a work certificate if required by State	2.)		
Are you willing to tra	avel? YES 🔲 NO 🔲 Are you willing	to relocate as may be required?	YES 🔲 NO 🗀		
Are you willing to tal	ke a pre-employment drug test? YE	ES 🔲 NO 🖫			
Are you will to have	a background check completed? YE	SS CI NO CI			
Are you will to have	a background check completed: TE				
EMPLOYMENT DES	SIRED				
Position applying for	r:				
	r: □Hourly □Weekly □Anr				
	□Hourly □Weekly □Anr	nually	vork are you seeking?		
Salary Desired:	□Hourly □Weekly □Anr f this opening?	nually	vork are you seeking? □ Part-time		
Salary Desired:	□Hourly □Weekly □Anr f this opening? 	nually What type of w			
Salary Desired: How did you learn o Advertisement	□Hourly □Weekly □Anr f this opening? 	nually What type of w Full-time Regular If Part Time:	☐ Part-time ☐ Temporary If Temporary:		
Salary Desired:  How did you learn o  Advertisement  Referred By  Other	□Hourly □Weekly □Anr f this opening? 	what type of was a Full-time Regular If Part Time: Days:	☐ Part-time ☐ Temporary		
Salary Desired:  How did you learn o  Advertisement  Referred By  Other	□Hourly □Weekly □Anr f this opening?  n start:	what type of was a Full-time Regular If Part Time: Days:	☐ Part-time ☐ Temporary  If Temporary: Weeks:		

List other special skil	ls or licenses tha	t are applicable to	o this employment:	
DRIVING INFORM	ATION			
(This job may require	e driving) Do you	have a current a	nd valid state drivers' licen	se? YES 🗖 NO 🗖
Has your license bee	n revoked or sus	pended in the las	t three years? YES 🖵 NO	
OTHER INFORMAT	TION			
	•		or CES Facilities Managem	nent Services? YES 🔲 NO 🔲
WORK HISTORY				
WORK HISTORY				
List most recent job fir	st) Be sure to acc	count for all infor	mation requested in the W	ork History section of this applica
May we contact your cu	ırrent employer?	YES 🔲 NO 🗀		
Employer Name:			From:	To:
				Phone: Hours Per Week:
ob Responsibilities:		Superv	risor Nume.	nours rer week.
Salary: 🗖 Hourly	□Weekly	☐Annually	Beginning \$	Ending \$
Reason for Leaving:				
				To:
				Phone: Hours Per Week:
ob Responsibilities:		•		
Salary: 🗖 Hourly	□Weekly	☐Annually	Beginning \$	Ending \$
Reason for Leaving:				
Employer Name:			From:	To:
				Phone:
ob Responsibilities:				Hours Per Week:
Salary: 🗖 Hourly	□Weekly	☐Annually	Beginning \$	Ending \$
Reason for Leaving:				
Emplover Name:			From:	То:

\_\_\_ \_City:\_\_\_

Address:\_\_

Phone:\_

\_State:\_\_\_\_\_

Position: Job Responsibilities:				Hours Per W	/eek:
Salary:	□Weekly	□Annually	Beginning \$	Ending \$	
Reason for Leaving:					
EDUCATIONAL INFORM	IATION				
School	Name & Add	ress of School	Did you Graduate?	List Di	ploma, Degrees
High School			YES 🗖 NO		
College			YES 🗖 NO		
Other (i.e. Grad., Vocational or trade schools, apprenticeship, etc.			YES 🖵 NO		
REFERENCES  List below three persons (other on your behalf that you have keeping to be a second			lling to answer a business-r	related reference inqui	ry from our Company
Name		wn of Residence	Phone Number	Years Known	Occupation
1. 2.					
3.					
CT, CA, IL, & MA APPLIC Prior to answering the follo acknowledge the state-spe Have you ever been convict which you have not been p	wing questio cific informat ted of a crime	ion, which appea e, the record of w	rs at the end of this emp	loyment application	
р	ardoned? YE	S 🔲 NO 🔲 or No	Record		

## I hereby certify that the information provided on this application (and accompanying resume, if any) is true and complete

PRE-EMPLOYMENT STATEMENT

to the best of my knowledge. I understand that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for termination if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperation such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information. I hereby agree to submit to any lawful drug testing that may be required as a condition of employment or continued employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including termination.

Any time after a conditional offer of employment or during employment, I authorize any physician or health care provider to release information advising the company: (1) whether I am currently able to perform the specific job for which I am being considered or employed with or without reasonable accommodation and the basis for such conclusions; and (2) whether I can perform the job without posing a direct threat to the health or safety of myself or others.

I understand that my employment is at will, and that I have no express or implied contract with the Company concerning the terms and conditions of my employment. Both the Company and I have the right to terminate the employment relationship at any time, with or without cause, and with or without notice. I further acknowledge that I have no relied, or will not rely, upon any representations to the contrary, either in accepting employment with the Company or in continuing my employment with the Company. Also, the Company has the right to modify any policies adopted by the Company, and such policies do not create any contractual commitments by the Company.

I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. Citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law.

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Signature of Applicant (As shown on Social Security Card)	Date of Application