

## **Building Energy**

## **Employment Application**

		Applicant Inf	ormation		
Full Name:					Date:
	Last	First	Middl	e	
Address:	-				
	Street Address				Apartment/Unit #
	City			State	ZIP Code
	·				
Telephone:		En	nail Address:		
When Can	ou Start?	Social Security No.:		Desired Wage	e: <u>\$</u>
Position App	olied for:				
How did you	ı hear of this opening?				
How many h	nours can you work we	ekly?			
Employmen	t Desired:   Full-time	☐ Part-time ☐ Full or Pa	rt-time		
	.S. citizen or otherwise e required to provide d	e authorized to work in the U ocumentation).	.S. on an unrestric	ted basis?	☐ Yes ☐ No
		Drivin	g		
Do you have	e a driver's license?	] Yes ☐ No			
State of issu	ıe:		Commercial (CD	L) 🗌 Chauffeur	
Expiration d	ate:				
What is you	r means of transportat	ion to work?			
Have you ha	ad any accidents durin	g the past three years?	☐ Yes ☐ No	How many	?
Have you ha	ad any moving violatio	ns during the past three year	rs? 🗌 Yes 🗌 No	How many	?
		Educat	ion		
		Name and Location	Year	Major	Degree
High School Trade School					
College					
Post-College	·				
Other Traini	ng				

In addition to your work history,	are there other skills, qualifications, or experie	ence that we should consider?
	Specific Skills	
Please list your specific skills in	construction, renewable energy, insulation, wa	arehouse, carpentry, or building services:
	-	
Please list the tools you are exp	erienced with:	
Please list the equipment and ve	ehicles you are experienced with:	
	Armed Forces	
Have you ever been in the Arme	ed Forces?	
Are you now a member of the N	ational Guard?	
Specialty:	Date Entered:	Discharge Date:
	Employment History	
	Start with most recent employer	
Company:		Telephone:
Address:		Supervisor:
Date Started:	Starting Wage:	Starting Position:
Date Ended:	Ending Wage:	Ending Position:
May we contact your previous s	upervisor for a reference?	
Responsibilities:		
Reason for Leaving:		

Company:		Telephone:
Address:		Supervisor:
Date Started:	Starting Wage:	Starting Position:
Date Ended:	Ending Wage:	Ending Position:
May we contact your previous su	pervisor for a reference?  Yes  No	
Responsibilities:		
Reason for Leaving:		
Company:		Telephone:
Autologica		Our amiliana
Date Started:	Starting Wage:	Starting Position:
Date Ended:	Ending Wage:	Ending Position:
May we contact your previous su	pervisor for a reference?    Yes    No	
Responsibilities:		
Reason for Leaving:		

Attach additional information if necessary.

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

## **Application Form Waiver**

In exchange for the consideration of my job application by Building Energy, Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President / General Manager of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies, and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any times during the probationary period or thereafter, my employment relation with the company is terminable at will for any reason by either party.

company is	terminable at will for any reason by entier party.	
Signature:		Date:

Thank you for completing this application form and for your interest in our business.