

REFERRED BY ?

U S Sprinkler, Inc.



Employee Application

Phone: (770) 474-8668

Fax: (678) 623-0675

Date:

APPLICANT INFORMATION

First Name/ M.I.:			Last Name:		
Phone:	E-mail:		SSN:		
Street Address:				Apartment #:	
City:		State:		ZIP:	
Date Available:		Perferred Contact? <input type="checkbox"/> Phone <input type="checkbox"/> E-mail	Position Desired?		
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No, but I am authorized to work in the U.S.				Desired Salary?	
Have you ever worked for U S Sprinkler? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, why did you leave?			
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, explain:			

EDUCATION

High School Name:		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Graduation
College Name:		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	Graduation

REFERENCES - Please list three professional references.

Full Name:		Relationship:	
Company Name:		Phone Number:	
Full Name:		Relationship:	
Company Name:		Phone Number:	
Full Name:		Relationship:	
Company Name:		Phone Number:	

PREVIOUS EMPLOYMENT

Complany Name:		Phone Number:	
Address:		Supervisor Name:	
Job Title:		Starting Salary:	Ending Salary:
Responsibilities:			
From	To	Reason for leaving?	

May we contact your previous supervisor for a reference? Yes No

Complany Name:		Phone Number:	
Address:		Supervisor Name:	
Job Title:		Starting Salary:	Ending Salary:
Responsibilities:			
From	To	Reason for leaving?	

May we contact your previous supervisor for a reference? Yes No

Complany Name:		Phone Number:	
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Address:			Supervisor Name:		
Job Title:			Starting Salary:	Ending Salary:	
Responsibilities:					
From	To	Reason for leaving?			

May we contact your previous supervisor for a reference? Yes No

MILITARY SERVICE

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

GENERAL QUESTIONS

Do you have reliable transportation (able to get to job site each day)?

Yes No

Yes No

Yes No

Yes No

BACK GROUND CHECK AUTHORIZATION

Former Names:					
Current Address:				Since Year:	
Previous Address:				Year:	
Previous Address:				Year:	
Date of Birth:		Drivers License Number:			State:

I hereby authorize *U S Sprinkler, Inc.* and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; credit reports, current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency to divulge any and all information, verbal or written, pertaining to me, to *U S Sprinkler, Inc.* or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources. *U S Sprinkler, Inc.* and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicants personal information, including, but not limited to, addresses, social security

Signature for Back Ground Check:					
Date:					

Signature for Application in whole:					
Date:					