

APPLICATION FOR EMPLOYMENT

Cavallero Heating & Air Conditioning, Inc. is an at-will employer. This means that either Cavallero Heating & Air Conditioning, Inc or the employee may terminate the employment relationship at any time for any reason. Employment at Cavallero Heating & Air Conditioning, Inc. is for an indefinite period of time and there shall be no contract, express or implied to the contrary.

DATE: _____, 20_____ SOCIAL SECURITY # XXX-XX-
Last 4 only

NAME: _____
First Middle Last

ADDRESS: _____
No. Street City State Zip Code

PHONE: (____) _____ Email Address: _____

Please mark one of the boxes above as your preferred method of contact.

Are you legally eligible for employment in the USA? YES OR NO (Circle only One)

What method of transportation will you use to get to work? _____

Position(s) applied for: _____

_____ Rate of Pay Expected? _____ (Per Hour)

Were you previously employed by us? _____ If yes, when? _____

If your application is considered favorably when would you be able to report to work? _____

List experience, skills, and/or qualifications that you feel would qualify you to work with our company:

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Have you ever been convicted of a crime, excluding misdemeanor and summary offenses, in the past ten years which has not been annulled or expunged or sealed by a court?

Yes or No? (Circle One)- If Yes, describe in full: _____

Are you over the age of 18? Yes or No? (Circle only 1)

Can you perform the essential functions of the position(s) for which you have applied, with or without reasonable Accommodation(s)? Yes or No? (Circle only 1)

EDUCATION INFORMATION:

Last Grade Completed in School: _____

Name of School with City & State: _____

Date of Completion (Month/Year): _____

College and/or Trade Schools attended: (Include any applicable certification classes, seminars and dates attended): _____

PLEASE READ & SIGN BELOW:

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements made on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of the factions provided above. I further understand that Cavallero Heating & Air Conditioning, Inc. is an At-Will employer, which means that either employee or employer may terminate employment relationship at any time, for any reason, or for no reason.

Signature of Applicant

Date Signed

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LIST BELOW ALL PRESENT & PAST EMPLOYMENT (MOST RECENT FIRST):

Start Date & End Date	Company Name & Address	Phone # & Name Of Supervisor	Reason For Leaving	Rate of Pay/HR

May we contact the Employers listed above? Yes or No (Circle only 1)

If not, please indicate which ones you do not wish us to contact. _____

PERSONAL REFERENCES: (Do not list relatives or Former Employers)

Name & Occupation	Address	Phone Number/Email Address

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Do you hold a current Drivers License? Yes or No (Circle only 1) If Yes, please fill out information below:

Driver's License issued in what State? _____ License # _____

Expiration Date: _____ Are you over the Age of 21*? _____

*Cavallero Heating & Air Conditioning, Inc's Auto Insurance policy requires employees be at least 21 to operate company vehicles.

Please initial below, to acknowledge the following policies (information attached):

Drug & Alcohol Policy: _____ E-Verify: _____

Below For office use only:

Interviewed by:	Date:	Comments:	Follow Up Notes:
References Checked by:	Date:	Comments:	Additional Notes:

Date Hired If Applicable: _____

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Appendix F

DRUG TESTING PROGRAM

Cavallero Heating & Air Conditioning, Inc. has a vital interest in maintaining safe, healthful and efficient working conditions for its customers, and employees. Using or being under the influence of drugs and/or alcohol on the job may pose serious safety and health risks not only for the user, but also to the public and all those who work with the user. The possession, use or sale of an illegal drug or controlled substance (Including Alcohol & Marijuana) may also pose unacceptable risks to safe, healthful and efficient operations.

To meet this compelling interest, individuals who wish to be considered for employment must agree to **DRUG AND ALCOHOL TESTING DURING EMPLOYMENT.**

By completing and signing this notice and the attached Application of Employment, the applicant understands and agrees to submit to drug and alcohol testing during the course of employment as provided for in Cavallero Heating & Air Conditioning, Inc.'s Drug and Alcohol Policy. The applicant further understands and agrees to release Cavallero Heating & Air Conditioning, Inc. and its directors, officers, agents, employees, parents, subsidiaries and affiliated concerns from any and all liability, claims demands, damages and causes of action of every kind and nature arising out of or resulting from or in connection with submitting to drug and alcohol testing and any decision concerning employment made by Cavallero Heating & Air Conditioning, Inc. in whole or part, based upon the results of drug and alcohol testing.

ANY APPLICANT WHO IS UNWILLING TO AGREE TO THESE CONDITIONS SHOULD NOT APPLY FOR EMPLOYMENT WITH CAVALLERO HEATING & AIR CONDITIONING, INC.

Applicant's Signature

Date

(This document is from Cavallero Heating & Air Conditioning, Inc's Drug & Alcohol Policy, this is not the full policy, just an acknowledgement that a policy is in place)

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**This Organization
Participates in E-Verify**

**Esta Organización
Participa en E-Verify**



This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.

If E-Verify cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact Department of Homeland Security (DHS) or Social Security Administration (SSA) so you can begin to resolve the issue before the employer can take any action against you, including terminating your employment.

Employers can only use E-Verify once you have accepted a job offer and completed the Form I-9.

E-Verify Works for Everyone

For more information on E-Verify, or if you believe that your employer has violated its E-Verify responsibilities, please contact DHS.

Este empleador participa en E-Verify y proporcionará al gobierno federal la información de su Formulario I-9 para confirmar que usted está autorizado para trabajar en los EE.UU..

Si E-Verify no puede confirmar que usted está autorizado para trabajar, este empleador está requerido a darle instrucciones por escrito y una oportunidad de contactar al Departamento de Seguridad Nacional (DHS) o a la Administración del Seguro Social (SSA) para que pueda empezar a resolver el problema antes de que el empleador pueda tomar cualquier acción en su contra, incluyendo la terminación de su empleo.

Los empleadores sólo pueden utilizar E-Verify una vez que usted haya aceptado una oferta de trabajo y completado el Formulario I-9.

E-Verify Funciona Para Todos

Para más información sobre E-Verify, o si usted cree que su empleador ha violado sus responsabilidades de E-Verify, por favor contacte a DHS.

888-897-7781
dhs.gov/e-verify



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