

Pre-Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

ARMSTRONG ELECTRIC CO., INC.
4920 CHANEY STREET
PENSACOLA, FLORIDA 32503

DRUG FREE WORK PLACE

APPLICANTS WILL BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE PAGES 1-5. DATE: _____

Name: _____
Last
First
Middle

Present address: _____
Number
Street
City
State
Zip

How long: _____ Email _____

Telephone: _____

If hired, can you offer proof that you are at least 18 years of age? Yes No

Do you have a problem with working evening, nights or weekends? Yes No
 If yes, Explain: _____

Position applied for:
 Electrician Service Technician Apprentice Helper
 Job Foreman Other _____

and salary desired _____
 (Be specific)

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL OR PART-TIME

Type of School	Name of School	Location (Complete mailing address)	No. Years Completed	Major & Degree

Are you a license Journeyman Electrician? Yes No
 If yes, Please list all cards, issuing authority and card number:

Issued By: _____ Card Number: _____
 Issued By: _____ Card Number: _____
 Issued By: _____ Card Number: _____
 Issued By: _____ Card Number: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? NO YES
 A conviction will only be considered as it relates to fitness to perform the job being sought.

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

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MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From: To:	Start: Final:
	Your last job title:		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or Salary
		From: To:	Start: Final:
	Your last job title:		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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May we contact your present employer? Yes No

Did you complete this application yourself? Yes No

If not, who did? _____

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PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Armstrong Electric Co., 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 Armstrong Electric Co., Inc. 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 Armstrong Electric Co., Inc. 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 the 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 contact.

I, also, understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant: _____ **Date:** _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

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