

## APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, severe/morbid obesity, medical condition, military/veteran status, genetic information, marital status, ethnicity, alienage or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative.

Please print and mail or deliver to ABSOLUTE PLUMBING 4123 West Pine Street, Appleton, WI 54914 www.absoluteplumbing.com, 920-757-7222

Position(s) Applied for

Date of Application

1 osicion(s) Applica for			Bate of Application			
Print Name (Last, First, & Middle)						
Street Address			City	State	Zip Code	
Main Phone Number Alternate Phone Number			Email			
EMPLOYMENT EXPERIENCE Please list the names of yor recent employer listed first. Supply business references.	Be sure to account for all	per	riods of time. If self-en			
Name of Employer Su			pervisor	May we contact?		
				□ Yes □ No		
Street Address						
Phone Number		Dat	tes Employed (Month/Y	'ear)		
		Fro	om	То		
Job Title and Duties		Rea	ason for Leaving			

Name of Employer	Supervisor	May we contact?	
		□ Yes □ No	
Street Address			
Phone Number	Dates Employed (Month/Ye	ear)	
	From	То	
Job Title and Duties	Reason for Leaving		
Name of Employer	Supervisor	May we contact?	
		□ Yes □ No	
Street Address			
Phone Number	Dates Employed (Month/Year)		
Filotie Nutibei			
Filone Number	From	То	
Job Title and Duties		То	
	From	То	
	From	То	
	From	То	
Job Title and Duties	From Reason for Leaving		
	From  Reason for Leaving  to resign from any job?		
Job Title and Duties  Have you ever been involuntarily terminated or asked	From  Reason for Leaving  to resign from any job?		
Job Title and Duties  Have you ever been involuntarily terminated or asked	From  Reason for Leaving  to resign from any job?		
Job Title and Duties  Have you ever been involuntarily terminated or asked	From  Reason for Leaving  to resign from any job?		
Job Title and Duties  Have you ever been involuntarily terminated or asked	From  Reason for Leaving  to resign from any job?		
Job Title and Duties  Have you ever been involuntarily terminated or asked	From  Reason for Leaving  to resign from any job?		

Please list any Please should	y other experience, job d be considered in eval	related skills uating your qu	, additional lanualifications for	iguages, employ	or other qua ment.	lifications that you
DUCATION ease describ	pe your educational ba	ckground in th	e table provide	ed below	/.	
	School Name	Years Completed	Diploma/ Degree (Yes/ No)		f Study/	Specialized Training, Skills, or Extra-Curricular Activities
ligh School						
College/ University						
Graduate/ Professional School						
rade chool						
Other						
	PROFESSIONAL REFERENCES Tee professional referen		uals who are no	ot relate	ed to you.	
ame and Ti	•	Relationship			Phone Numb	er or Email
ERSONAL REFE	ERENCES Tee people who know y	ou well				
lame and Ti			and Years Acqu	ainted	Phone Numl	per or Email

	AL INFORMATION Have vou ev		er name?				□ Yes □ N	lo
	2. Is any additional information relative to name changes, use of an assumed name, or nickname							
	necessary to enable a check on your work and educational record? Yes □ No					10		
	a. If yes	s to either of t	he above, ple	ase explain:				
3.	•	er worked for				Yes 🗆 No		
	a. If yes	s, please give o	dates and posi	tion:				
4.	-	friends and/o s, name(s) and		_			Yes 🗆 N	10
5.		e are you avai						
6.	6. Days/Hours available to work:							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
7.	7. Are you available to work?   Full-time   Part-time   Shift Work   Temporary							
					-		Month \$	
9.	If hired, wou	uld you have a	reliable mear	ns of transport	ation to and fr	om work?		10
10	. Can you trav	el if the posit	ion requires it	?			□ Yes □ N	10
11	11. Can you relocate if the position requires it? $\square$ Yes $\square$ No							
12	12. Are you at least 18 years old? □ Yes □ No							
	a. Note: If under 18, hire is subject to verification that you are of minimum legal age.							
13	13. If hired, can you present evidence of your identity and legal right to work in this							
	country? ☐ Yes ☐ No							
14	-	•	ne essential jo	b functions of	the job for wh	nich you are a	pplying with or	
	without reas							
							Yes □ 1	
							easures that may l 	эe
	nece	ssary for quali	riea applicant	s/employees t	o pertorm esse	ential job fund	ctions.	

APPLICANT STATEMENT AND AGREEMENT Please read and initial each paragraph below. If there is anything that you do not understand, please ask.
I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
In the event of my employment with the Company, I understand that I am required to comply with all rules and regulations of the Company.
If hired, I understand and agree that my employment with the Company is at-will, and that neither I, nor the Company is required to continue the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.
I understand that safety of employees is extremely important to the Company and that the Company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.
I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.
I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable.
MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS.
Signature:
Name (print):
Date:

**Legal Disclaimer:** This document is intended for informational purposes only, and does not constitute legal information or advice. This information and all HR Support Center materials are provided in consultation with federal and state statutes and do not encompass other regulations that may exist, such as local ordinances. Transmission of documents or information through the HR Support Center does not create an attorney-client relationship. If you are seeking legal advice, you are encouraged to consult an