

For Official Use Only Date Received:	, 20
Reviewed by:	
Comments:	

## **EMPLOYMENT APPLICATION**

McCarty Electric Company provides equal employment opportunity to all qualified persons, and does not unlawfully discriminate against any person on the basis of race, color, creed, religion, sex, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

## Please -

- Complete <u>all</u> items on the application, even if the information is included on your resume or other document submitted by you.
- Sign and date your application.
- Specify the exact title of the position in which you are interested.
- Type or print all requested information.
- $\bullet\,$  If necessary, attach additional 8 ½ " x 11" sheets of paper to this application.
- Submit your application to 4004 C Sam Houston Avenue Huntsville, TX 77340

Position Applying For:			
	Personal Information		
1. Name (Last, First Middle)	3. Social Security #	6. Driver's Licen	nse (State/No.)
2. Address (Street)	4. Telephone Number ( ) -	7. Alternate Tele	ephone
Address (City, State, Zip Code)	5. Email Address		
	General Information		
Are you legally eligible for work in the U.S.A.?  (if yes, verification will be required)		□ Yes □	□ No
Have you ever applied to or worked for McCarty Electric Company before?  If so, when?		□ Yes □	] No
Are any of your relatives currently working for McCarty Electric Company? If so, please list name and department, if applicable.		□ Yes □	] No
Have you ever been convicted of a felony If yes, please explain.	?	☐ Yes □	] No

		Employme			
Minimum Salary Requ	uested: \$ If applicable, are you available for overtime? ☐ Yes ☐ No				□ No
What is the earliest da	te you can begin wor	rk?			
How did you hear abo	out this position?		C 1 E C	Mahaita 🗖 Othor	
☐ Recruiter ☐ Inter	net Job Posting	WITH THE PARTY OF	AND THE RESERVE OF THE PARTY OF	pany Website  Other_	
	*Ple	Employme ase begin with mo	nt Fusiory st recent emplo	yment	
May we contact your current employer? ☐ Yes ☐ No ☐ Not Applicable					
-111		Dates of	Pay or	Position:	Reason for
Employer:		Employment	: salary	Duties:	Leaving:
Address:			Start:		
		-			
		_ to	Final:		
Supervisor:			THIAL.		
Telephone: ( )					
F1		Dates of	Pay or salary	Position: Duties:	Reason for Leaving:
Employer:		Employment	Salary	Duties.	Leaving.
Address:			Start:		
		-			
: <del></del>		_   to	Final:		
Supervisor:					
Telephone: ( )					
Telephone: ( )	<del>-</del>	D. C	D	Position:	Reason for
Employer:		Dates of Employment	Pay or salary	Duties:	Leaving:
Littpio/cr.					8
Address:			Start:	1	
		to			
			Final:		
Supervisor:		<del></del>			
Telephone: ( )	<del>-</del>				
		Educ	ation		
School	Name	Loca	ation	Course of Study	Degree Obtained
High School/GED					
College/University					
Graduate School					
Vocational /					
Specialized					
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Military				
Military Service: ☐ Yes ☐ No Branch:  Specialized Training:				
	Ret	erences		
Name	Company	Title	Contact Information	
		Section Conference		
Signature / Certification				
I certify that the facts set forth in this application are true, complete, and correct to the best of my knowledge. I understand that any misrepresentations, falsifications, or omissions on this application can be grounds for rejection of my application or, if I am employed by this company, for my immediate termination from employment. I authorize McCarty Electric Company to make any necessary inquiries and investigations into my education, military, or employment history. I further authorize, unless otherwise indicated on this application, the release of my information to McCarty Electric Company by any of the schools, services, or employers listed on this application.				
Signature:		Date:		
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## CONFIDENTIAL

## **Background Check Authorization**

Print Name				<u>-</u>	
,	First	Middle		Last	
Former name(s) u	ısed:				
Current Address	Street Address				
	Street Address	City	State	Zip	
How many y	years have you been a	t this address?;_		<del>_</del> .	
Previous Address	s (if less than 5 years a	t current address	s):		
Street Addre	ess City	State	Zip	# of years	
Social Security No	umber:	Dat	te of Birth: _		
Telephone Number	er:				
Drivers' License N	Number/State Issued II	O Number:	Ex	kp. Date:	
The information contained in this application is true.					
I hereby authorize McCarty Electric Company 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 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 o 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 McCarty Electric Company 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 of data received from other sources. McCarty Electric Company and its designated agents and representatives shall maintain all information received from this authorization in a confidential manner in order to protect the applicant's personal information, including but not limited to, addresses, social security numbers and dates of birth.					
Signature:		Dat	e:		