

EMPLOYMENT APPLICATION

POSITION APPLYING FOR (check one):

PLUMBING TECHNICIAN LICENSE #

HVAC SERVICE TECHNICIAN LICENSE #

OTHER(PLEASE SPECIFY):



T.E. SMITH & SON, INC.
2043 NORTHWOOD DR.
SALISBURY, MD 21801
410-749-4232
410-548-5419 (FAX)

Personal Data

First Name		Last Name		MI
Address			Date of Birth	
City	State	Zip	Home Phone	
Email			Cell Phone	
SS#	Driver's Lic#			

Hours Available

Education

School	Name, Address, Phone	Degree/Major
High School		
Graduate _____		
Vocational/Trade School		
Graduate _____		
College/University		
Graduate _____		
Other Training		
Graduate _____		

List any skills, licenses, or certificates that are job related:

Employment History

Company Name	Position/Duties
Address	
Salary	
Phone#	Dates - From: - To:
Supervisor	Reason for Leaving

Company Name	Position/Duties
Address	
Salary	
Phone#	Dates - From: - To:
Supervisor	Reason for Leaving

Company Name	Position/Duties
Address	
Salary	
Phone#	Dates - From: - To:
Supervisor	Reason for Leaving

Have you ever been hurt on the job? _____
If yes, what happened?

Do you have any medical conditions we should be aware of? _____
If yes, please explain.

Specialty Information

What kind of experience makes you the best choice for this employment position?

Professional/Personal References – List three

Name	Address	Phone

If applicable, may we contact your present employer? _____

If hired, expected salary _____

I hereby certify that the answers given by me to the foregoing questions and statements made on this application are true and correct and understand that false or misleading statements or omissions may cause rejection of my application or result in my dismissal post-hiring. In the event of an offer of employment, I agree, if applicable, I may be asked to submit to a drug screen and understand that my employment is contingent upon satisfactory completion of the drug screen. I authorize T.E. Smith & Son, Inc. and its agents to investigate all statements in this application and to secure any necessary information from all my employers, references and academic institutions. I hereby release all of those employers, references, and academic institutions and T.E. Smith from any and all liability arising from their giving or receiving information about my employment history, academic credentials or qualifications, and suitability for employment with T.E. Smith. I hereby authorize T.E. Smith and its agents to receive any criminal history information pertaining to me in which is permitted by law. I also understand that T.E. Smith has the right to modify its policies without giving me any notice of the changes. I understand that I shall not become an employee of T.E. Smith until I have been interviewed and officially hired. In addition, if I am employed, I will comply with all rules and regulations of T.E. Smith & Son, Inc.

Signature _____

Date _____

APPLICATION WILL BE CONSIDERED CURRENT FOR 60 DAYS.

**PLEASE FAX BACK TO 410-548-5419 OR MAIL TO:
2043 NORTHWOOD DR.
SALISBURY, MD 21801**

REMARKS:

OFFICE USE ONLY