

BOSCAR ELECTRIC CO., INC.

Licensed Electrical Contractor & Consultant

Employment Application

NOTE: We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

Position Applying For:

- Electrical Estimator
- Journeyman Electrician
- Electrician
- Apprentice Electrician
- Laborer

(Please Print)

Last Name		First Name		Middle Name or Initial	
Street Address		Apt. #	City, State, Zip Code		Yrs. at this Address
Phone Number(s)		Daytime	Evening	Cell	
Social Security Number		[][][] - [][] - [][][][][]			

CHECK ONE (YES OR NO)

Are you legally eligible for employment in the United States?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are you currently on unemployment?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are you currently employed?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, where? _____		

Have you ever applied for employment with us?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, when? _____		
Are you available to work full time?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Are you available to work overtime?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
On what date would you be available to begin?		
Can you travel if the job requires it?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you have OSHA 10 training?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you currently hold an electrician's license?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, from where? License # _____		
City: _____		
What is your desired salary to start? \$ _____/hr.		
Have you been convicted of a felony within the last seven (7) years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, please explain: _____		

<i>Conviction will not necessarily disqualify an applicant from employment</i>		
Do you possess a valid N.Y.S. driver's license?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If YES, are there any violations? Please explain: _____		

<i>(This job may require you to drive a company vehicle and we need to know of any violations for insurance purposes. This will not affect our decision regarding your employment)</i>		
Do you have a CDL license?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

EDUCATION

	Name and Address	Course of Study	Years Completed	Diploma/ Degree
Elementary School				
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

Describe any specialized training, apprenticeships, skills and/or any additional information you feel may be helpful to us in considering your application: _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Company Name	Telephone ()
Address	Employed (State month and year) From: To:
Name of Supervisor	Weekly Pay Start: Last:
Job Title	Reason for Leaving
Describe Your Work	
Company Name	Telephone ()
Address	Employed (State month and year) From: To:
Name of Supervisor	Weekly Pay Start: Last:
Job Title	Reason for Leaving
Describe Your Work	
Company Name	Telephone ()
Address	Employed (State month and year) From: To:
Name of Supervisor	Weekly Pay Start: Last:
Job Title	Reason for Leaving
Describe Your Work	
Company Name	Telephone ()
Address	Employed (State month and year) From: To:
Name of Supervisor	Weekly Pay Start: Last:
Job Title	Reason for Leaving
Describe Your Work	

Rate your ability to complete the following tasks: **N = NO EXPERIENCE** **G = GOOD** **V = VERY GOOD** **E = EXCELLENT**

- | | | |
|-----------------------------------|-----------------------------------|------------------------------------|
| _____ FIRE ALARM | _____ RESIDENTIAL WORK | _____ MOTORS & CONTROLS |
| _____ SERVICE EQUIPMENT | _____ COMMERCIAL WORK | _____ INDUSTRIAL WORK |
| _____ CONDUIT BENDING | _____ COMPUTER WIRING | _____ WIRE PULLING |
| _____ FIBER OPTICS (CAT-5) | _____ AERIAL/CRANE SERVICE | _____ SITE WORK |

Describe briefly your electrical field experience and jobs which you have worked on or done within the last three (3) years:

Have you ever managed a project or acted as a foreman with others working under your direction? If so, explain:

What level of National Electrical Code Review Classes have you attended? If so, when and where? _____

Do you have experience in Bucket Truck operations? _____

Do you have experience in high voltage work? If so, explain: _____

Do you have any restrictions or obligations that would prevent you from working consistently or arriving to work on time? If so, please explain: _____

If this job required climbing or heavy lifting, do you have any restrictions that would prevent you from performing these tasks? If so, please explain: _____

If there anything that would interfere with your ability to work the required schedule? If so, please explain: _____

Some jobs require a smoke free environment. Would this be a problem for you? _____

If required, would you be available to take a drug test? _____

Describe your long term goals in relation to this job: _____

Give a brief summary of your past electrical experience:

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview

YES

NO

Remarks: _____

Employed

YES

NO

Dates of Employment _____

Job Title _____

Hourly Rate/Salary _____

Department _____

By _____

Name and Title

Date

NOTES
