M&M ELECTRICAL CONTRACTOR, INC APPLICATION FOR EMPLOYMENT

****THIS COMPANY IS AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER****

This application is not an employment contract but merely is intended to evaluate suitability for employment. In compliance with Federal and State equal opportunity laws, qualified applicants ate considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, non-job related disability, or any other protected group status.

TO BE READ AND SIGNED BY APPLICANT

I authorize you to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.)

I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and released information in connection with my application.

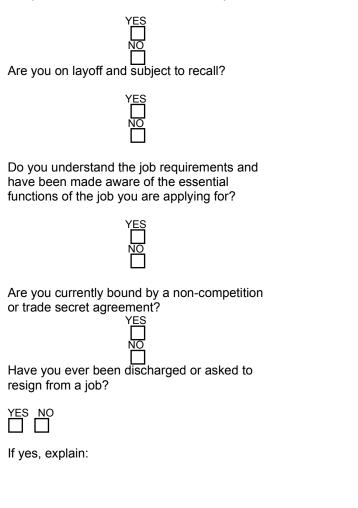
I understand that information I provide regarding current and/or previous employers may be used, and those employer(s) will be contacted, for the purpose of investigation my safety performance history as required by 49 CFR 391.23(d) and (e). I understand that I have the right to:

- Review information provided by previous employers;
- Have errors in the information corrected by previous employers and for those previous employers to re-send the corrected information to the prospective employer; and
- Have a rebuttal statement attached to the alleged erroneous information, if the previous employer(s) and I cannot agree on the accuracy of the information.

Signature Date

		(Please print a	all in	formation except signature)			
		Appl	ican	t Information			
Full Name:	Last	First		Date	:		
Current Address:	Street Address			Apartment/Unit #			
	City Please list your oth	er most recent	t addı	State	ZIP Code		
Address:	Street Address			Apartment/Unit #			
<i>Previous</i> Addresses:	City			State	ZIP Code	How Lor	ng? yr/mo
Addresses.	Street Address			Apartment/Unit #			
	City			State	ZIP Code		
	How Long? Yr/mo				i		
Phone:	()		E-n	nail Address:			
Date Availa		ecurity No.:		Desired Salary:	\$		
	tizen of the United States?	YES N		Are you at least 19 years of age?		YES	
Have you ev	ver worked for this company?	YES N		If so, when?			
Have you ev crime with ir	YES N		(Conviction will not necessarily disqualify you from employment.)				
lf yes, expla	in:						





Education							
High Schoo	bl:	Address:					
From:	To:	Did you graduate?	YES		Degree:		
College:		Address:					
From:	То:	Did you graduate?	YES		Degree:		
Other:		Address:					
From:	То:	Did you graduate?	YES		Degree:		
Previous Employment							
MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO							
Company:				Phone:	_()		

Address:			Sup	ervisor:				
Job Title:		Starting Salary:\$			Ending Salary:	\$		
Responsibilities:								
From:	To:	Reason for Leaving:						
May we contact your pre	evious supervisor for a re	eference?						
Company:			Phone:	()			
Address:			Sup	ervisor:				
Job Title:		Starting Salary:\$			Ending Salary:	\$		
Responsibilities:								
From:	To:	Reason for Leaving:						
May we contact your previous supervisor for a reference?								
Company:			Phone:	()			
Address:			Sup	ervisor:				
Job Title:		Starting Salary:\$			Ending Salary:	\$		
Responsibilities:								
From:	То:	Reason for Leaving:						
May we contact your pre Do you have a valid dri YE N	ver's license? ES	YES						
License #	State issued							

Have you been convicted of or pled guilty to any traffic-related offense with-in the past 5 yr.



If so, explain?

Have you had your driver's license suspended or revoked or your driving privileges modified by a court of law?



If so, explain?

Please list all states from which you hold or have held a driver's license:

Please list any professional licenses, designations, certifications, etc. that may relate to the position applied for:

Please list any special skills you may have that related to the position applied for:

Military Service								
Branch:	From:	To:						
Rank at Discharge:	Type of Discharge:							
If other than honorable, explain:								
Disclaimer and Signature								
Disclaimer and Signature								

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: