



# APPLICATION FOR EMPLOYMENT

## EQUAL EMPLOYMENT OPPORTUNITY

CONTROLLED AIR, INC IS AN EQUAL OPPORTUNITY EMPLOYER. THIS MEANS THAT THE COMPANY CONSIDERS ALL APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, NATIONAL ORIGIN, RELIGION, AGE, SEX, MARITAL STATUS, PREGNANCY, SEXUAL ORIENTATION, THE PRESENCE OF NON-JOB-RELATED MEDICAL CONDITION OR DISABILITY, VETERAN STATUS OR ANY OTHER LEGALLY PROTECTED CLASS.

Date \_\_\_\_\_

## PERSONAL INFORMATION

NAME: \_\_\_\_\_  
Last First Middle Social Security No.

### PRESENT ADDRESS:

\_\_\_\_\_  
No. Street City State Zip Code

PHONE NUMBER: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Home Other/(Cell)

Are you legally eligible for employment in the United States? Yes \_\_\_ No \_\_\_ (If Yes, verification will be required.)

Are you under the age of 18? Yes \_\_\_ No \_\_\_

Are you requesting any accommodation to complete the application process? Yes \_\_\_ No \_\_\_

## EMPLOYMENT DESIRED

JOB: Position(s) applied for: \_\_\_\_\_ Date Available: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

INTEREST: Regular/Full-time \_\_\_ Part-time \_\_\_ Temporary \_\_\_ Summer \_\_\_ Other \_\_\_\_\_

### WERE YOU REFERRED BY ANY OF THE FOLLOWING?

- Newspaper Advertisement  Name of Newspaper \_\_\_\_\_
- Employment Agency
- Employee  Name of Employee \_\_\_\_\_
- Other  \_\_\_\_\_

ARE YOU CURRENTLY EMPLOYED? Yes \_\_\_ No \_\_\_ If so, may we inquire of your present employer? Yes \_\_\_ No \_\_\_

Have you ever applied to work for Controlled Air before? Yes \_\_\_ No \_\_\_  
If yes, when? \_\_\_\_\_ Were you hired? Yes \_\_\_ No \_\_\_

## EMPLOYMENT INFORMATION

Are you physically and mentally able to perform the job applied for? Yes  No   
 If no, is there any accommodation that would allow you to perform this job? Yes  No

Can you work overtime? Yes  No

Can you work overtime without prior notice? Yes  No

Can you work on Saturday? Yes  No

Can you work on Sunday? Yes

No

Can you travel out of state if required by this position? Yes  No

Have you ever been convicted of a felony? Yes  No

If Yes, please list felonies and explain. (Conviction of a felony does not automatically preclude employment)

**NOTE: The applicant is not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-76o or 54-142a. The applicant is not required to disclose the existence of criminal records that are subject to erasure pursuant to Connecticut General Statutes sections 46b-146, 54-76o and 54-142a which are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon. The applicant is not required to disclose the existence of criminal records that have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-76o or 54-142a since the applicant shall be deemed to have never been arrested within the meaning of the general statutes with respect to these proceedings so erased and may so swear under oath.**

## DRIVER INFORMATION

Many positions at Controlled Air require employees to drive.

If you are applying for a driver's position or a position which requires driving, please answer the following:

Do you have a valid driver's license? Yes  No

If Yes - license no. \_\_\_\_\_ State \_\_\_\_\_ Expiration date \_\_\_\_\_

Do you have a CDL? Yes  No  If yes, Class A or B? \_\_\_\_\_

Has your license ever been revoked or suspended? Yes  No

## EDUCATIONAL HISTORY

	Elementary	High School	College	Trade School	Other
School Name					
Years Completed					
Diploma/Degree Received?					
Subjects Studied					

Describe specialized training, apprenticeship, skills or extra-curricular activities that relate to the position for which you are applying (omit any activities that would disclose your race, religion or other protected class):

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**EMPLOYMENT HISTORY**

List below all of your employers for the past five years. Attach an additional sheet if necessary.

Date Month and Year	Name and Address of Employer	Salary	Position	Reason For Leaving
From				
To				
From				
To				
From				
To				
From				
To				
From				
To				
From				
To				

Which of these jobs did you like best? \_\_\_\_\_

What did you like most about this job? \_\_\_\_\_

**REFERENCES**

Give names of three persons not related to you, whom you have known for at least one year, who can provide a reference:

Name	City & State	Telephone Number	Occupation	Years Known
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

State any additional information you feel may be helpful to us in considering your application:

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**APPLICANT'S STATEMENT**

**TO ALL APPLICANTS: PLEASE READ THIS SECTION CAREFULLY AND SIGNIFY YOUR UNDERSTANDING BY SIGNING YOUR NAME IN THE SPACE PROVIDED.**

**I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge. I understand that any falsification or material omission of fact on this application shall lead to refusal of employment or dismissal from employment.**

**I authorize the Company to check the references provided, and further authorize the investigation of all matters contained in this application to verify its accuracy.**

**I understand that the Company follows an "EMPLOYMENT AT WILL" policy, in that, I or the Company, may terminate my employment at any time, with or without notice, for any reason consistent with applicable State or Federal law. I understand that all employment appointments are "introductory," during which "introductory period," I must demonstrate my fitness for continued employment. I further understand that successful completion of the introductory period does not guarantee continued employment.**

**I understand that, as part of the application process, the Company conducts thorough background checks (which may include a check of my criminal history) on prospective employees. I agree that, if contacted with respect to such background check, that I will fully cooperate and provide any information requested.**

**I understand that I am not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-76o or 54-142a. The applicant is not required to disclose the existence of criminal records that are subject to erasure pursuant to Connecticut General Statutes sections 46b-146, 54-76o and 54-142a which are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon, and The applicant is not required to disclose the existence of criminal records have been erased pursuant to Connecticut General Statutes sections 46b-146, 54-76o or 54-142a since the applicant shall be deemed to have never been arrested within the meaning of the general statutes with respect to these proceedings so erased and may so swear under oath.**

**As a condition of employment, I understand that information relative to the status of any driving duties, particularly insurability of an employee who drives as part of his/her job, is an important job function. In the event that I am called upon to drive as part of my job functions with the Company then as a condition of my employment, I hereby authorize my employer and its insurance agent to ask for and receive information relative to the status of my motor vehicle operator's license and motor vehicle history in every State in which I have held a motor vehicle operator's license.**

**This authorization is valid from the date of my signature below throughout the term of my employment in which driving a Company motor vehicle is an essential job function. I understand that if at any time (now or in the future) the Company cannot insure me due to my motor vehicle operator history, my employment may be terminated.**

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APPLICANT'S SIGNATURE

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DATE

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## EMPLOYMENT INFORMATION AUTHORIZATION AND RELEASE

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I, \_\_\_\_\_, hereby authorize my previous employers to release to Controlled Air, any and all employment and personnel information requested, including, but not limited to personnel records, payroll records and any other documents of any nature in your possession, custody or control. I hereby specifically release and hold harmless Controlled Air and any past, present and future employers, their employees and agents, from any and all claims or liability as a result of disclosing or revealing any record or information concerning my employment, in accordance with this authorization to Controlled Air.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SOCIAL SECURITY NUMBER

**A photocopy of this authorization and release is as valid as the original.**

### Voluntary Survey

Government agencies at times require periodic reports on the sex, ethnicity, disability, veteran and other protected status of applicants. This data is for analysis and possible affirmative action only.

**SUBMISSION OF INFORMATION IS VOLUNTARY**

Check one	<input type="checkbox"/> Male	<input type="checkbox"/> Female		
Check one of the following:				
<input type="checkbox"/> White	<input type="checkbox"/> Black	<input type="checkbox"/> Hispanic	<input type="checkbox"/> American Indian/Alaskan Native	
<input type="checkbox"/> Asian/Pacific Islander				