



2411 Fleischmann Road
 Tallahassee, FL 32308
 Ph: (850) 386-4622
 millersplumbing.com

Application for Employment

Name _____ Date of Application _____
 Last First M.I.

Social Security No. _____ Telephone No. (____) _____ - _____

Present Address _____ How long have you lived there? _____
 No. and Street City State Zip Years Months

Previous Address _____ How long did you lived there? _____
 No. and Street City State Zip Years Months

Have you ever worked for Miller's Plumbing & Mechanical? No Yes

If yes, list dates of employment and job title _____ to _____
 Month / Year Month / Year Job Title

Do you have friends or relatives currently employed by Miller's Plumbing & Mechanical? No Yes

If yes, list names and relationship. _____
 Name Relationship

Have you ever pled guilty or "no contest" to a crime, been convicted of a crime, had adjudication withheld, prosecution deferred or do you have any criminal charges pending?

No Yes If yes, please provide dates and details of each. _____

Employment History

Please list the names of your present or previous employers in chronological order, with your present or most recent employer listed first. Please be sure to account for all periods of time, including any period of unemployment.

Current/Most Recent Employer	Dates of Employ	Rate of Pay	Position	Reason for Leaving
Employer Name Address City/State/Zip Phone	From: _____ Month / Year To: _____ Month / Year	\$ _____ /hour Or Salary \$ _____ /year	Job Title Supervisor Name Supervisor Position	

Previous Employer	Dates of Employment	Rate of Pay	Position	Reason for Leaving
_____ Employer Name _____ Address _____ City/State/Zip _____ Phone	From: _____ Month / Year To: _____ Month / Year	\$ _____/hour Or Salary \$ _____/year	_____ Job Title _____ Supervisor Name _____ Supervisor Position	

Previous Employer	Dates of Employment	Rate of Pay	Position	Reason for Leaving
_____ Employer Name _____ Address _____ City/State/Zip _____ Phone	From: _____ Month / Year To: _____ Month / Year	\$ _____/hour Or Salary \$ _____/year	_____ Job Title _____ Supervisor Name _____ Supervisor Position	

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Have you ever been terminated? No Yes If yes, please explain the circumstances _____

Please explain any gaps in your employment history _____

Education

School	School Name	Location (City/State)	Years Completed	Degree	Area of Study
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	n/a
College/ University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate/ Professional				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade/ Correspondence				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Personal References (No relatives, please)

Name	Relationship	Address	Telephone Number

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time, you must reapply.

This company is an equal opportunity employer and does not discriminate because of race, color, religion, sex, age, citizenship, marital status, disability or national origin.

I hereby certify that all of the information that I have provided in this application is true and accurate.

Signature of Applicant (Signature not required for electronic submission)

Applicant's Printed Name

Date

**EQUAL OPPORTUNITY EMPLOYER
APPLICANT'S STATEMENT**

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 90-day introductory period, and that termination for unsatisfactory performance during that period will not result in any Company responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing this application, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and any such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the Company may obtain a consumer report or reports on me. I authorize this Company to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, Department of Motor Vehicle reports, and investigative consumer reports. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

I hereby certify that I have read and understand the Equal Opportunity Employer Applicant's Statement above.

Signature of Applicant (Signature not required for electronic submission)

Applicant's Printed Name

Date

Submit completed application:

Email: info@millersplumbing.com
Fax: 850-385-9772
Mail: Miller's Plumbing & Mechanical
2411 Fleischmann Road
Tallahassee, FL 32308