



APPLICATION FOR EMPLOYMENT

To the Applicant: It is the policy and practice of Joe Hillman Plumbers, Inc. to select new employees based on qualifications only, without regard to race, religion, color, national origin, sex, age, marital status, disability, Veteran status, or other non-job related factors. Equal access to employment, services and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a Joe Hillman Plumbers, Inc. representative.

Date of application _____ Date Available for Employment _____

Position(s) Applying for _____ Salary Requirements _____

Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodations? _____ Yes _____ No If accommodations are required, please indicate on page three (3) of this application.

Type of Position Desired _____ Full-time _____ Part-time _____ Temporary

How were you referred to Joe Hillman Plumbers, Inc.? _____

PERSONAL DATA

Name _____ Social Security Number _____
 Last First Middle

Address _____ Telephone Evening _____
 Number Street Apt. #

_____ Telephone Daytime _____
 City State Zip Code

Please provide us with your email address: _____

Can you provide proof of legal employment authorization and identity? _____

Emergency Contact: Name _____

 Phone Number _____ Relationship _____

EMPLOYMENT HISTORY

Employer Name	Dates of Employment (Mo/Yr) From To	Dates of Employment (Mo/Yr) To:
Street Address	City, State, Zip	
Area Code/Phone	Name/Title of Supervisor	

Job Title _____

Reason for leaving (optional) _____

Job Duties (may refer to resume if attached) _____

EMPLOYMENT HISTORY (continued)

Employer Name	Dates of Employment (Mo/Yr) From:	Dates of Employment (Mo/Yr) To:
Street Address	City, State, Zip	
Area Code/Phone	Name/Title of Supervisor	

Job Title _____

Reason for leaving (optional) _____

Job Duties (may refer to resume if attached) _____

Employer Name	Dates of Employment (Mo/Yr) From:	Dates of Employment (Mo/Yr) To:
Street Address	City, State, Zip	
Area Code/Phone	Name/Title of Supervisor	

Job Title _____

Reason for leaving (optional) _____

Job Duties (may refer to resume if attached) _____

Employer Name	Dates of Employment (Mo/Yr) From:	Dates of Employment (Mo/Yr) To:
Street Address	City, State, Zip	
Area Code/Phone	Name/Title of Supervisor	

Job Title _____

Reason for leaving (optional) _____

Job Duties (may refer to resume if attached) _____

OTHER SKILLS AND QUALIFICATIONS

Summarize any job-related training, skills, licenses, certificates and/or qualifications: _____

EDUCATION HISTORY

List school name and location, years completed, course of study, and any degree earned:

High School _____

College _____

Technical Training _____

Post Graduate/Other _____

REFERENCES

Please give the names of two additional persons (not relatives) who may be contacted by Joe Hillman Plumbers, Inc... Both should have specific knowledge of your work experiences and/or capabilities.

Name	Address	Occupation	Phone Number	Years Known

If you are currently employed, may we contact your present employer for a reference? _____

MISCELLANEOUS

Do you have any relatives working for Joe Hillman Plumbers, Inc.? _____

Have you ever been convicted of a felony? If yes, please explain. _____

(Note: a conviction will not necessarily be a bar to employment. Relevant circumstances will be considered.)

Please list below any additional information you consider pertinent to your application for employment (including experiences, unique skills, honors, professional publications, professional affiliations, etc.) Indicate any accommodations required under the American with Disabilities Act (ADA).

I hereby authorize Joe Hillman Plumbers, Inc. to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability Joe Hillman Plumbers, Inc. and its representatives for seeking, gathering, and using such information. I also understand that the Company will undertake other background checks pertinent to the position for which I am applying, such as criminal background, driver's license, driving record and personal credit in accordance with Florida law and that I hold Joe Hillman Plumbers, Inc. harmless in these efforts.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of the application or immediate termination employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specific length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, Either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans with Disability Act (ADA).

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I also understand that Joe Hillman Plumbers, Inc. operates a smoke-free and drug-free workplace and I am prepared to take a pre-employment drug test.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under those conditions.

Applicant Signature _____ Date _____



Joe Hillman Plumbers, Inc.
2280 SW 70th Ave Ste. 1-2
Davie, FL 33317
Office: 954-577-9445
Fax: 954-577-2513

Employee Reference Form

Applicant Information

Applicant Name: Last First M.I. Date:

Position Applied for:
Joe Hillman
Plumbers Contact: Virginia Maxon Human Resources 954-577-9445

Contact Information

Name of Contact:
Title: Phone:
Company:
Address: Street Address Suite #
City State ZIP Code

Reference Comments

Was the applicant an employee of your company? YES NO
When? START DATE: END DATE:
What was the applicant's position on the last day of employment?

What were the applicant's job responsibilities?

How would you characterize the applicant's technical skills?

What was the applicant's reason for leaving your place of employment?

Would you rehire this applicant? Yes Or No
Is there anything else you would like to add?

Thank you for your time and assistance.

I authorize Joe Hillman Plumbers to obtain verification of my employment history:

Print Name Signature
Date Social Security Number