



Application for Employment

5310 E. Northgate Loop, Suite A
Flagstaff, AZ 86004

Please type application or print legibly by hand. Sign either digitally or manually.

Equal Access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) Applied for: _____ Date: _____

Name: _____

Last

First

Middle

Address: _____

Street

City

State

Zip Code

Phone # _____ Cell # _____ Social Security # _____

Email Address: _____

If you are under 18 and it is required, can you furnish a work permit? Yes No N/A

If No, please explain: _____

Have you ever been employed here before? Yes No

Are you legally eligible for employment in this country? Yes No

Type of employment desired: Full-time Part-time Temporary Seasonal

Date available to start: _____ Referred By (if applicable): _____

Are you able to meet the attendance requirements of the position? Yes No

Do you have a Driver's License, if driving is an essential job function: Yes No

Driver's license number and state, if driving is an essential job function: _____

Have you been convicted of a crime in the last seven (7) years? Yes No

If Yes, please explain: _____

Conviction will NOT necessarily be a bar to employment. Each instance and explanation will be considered in relation to the position for which you are applying.

How did you hear about this position? _____

Skills and Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. _____

Employment History

Provide the following information for your past four (4) employers, assignments of volunteer activities, starting with the most recent.

Employer: _____ Phone # _____

Address: _____

Job Title: _____ From: _____ To: _____

Supervisor and title: _____

Summarize the nature of work performed and job responsibilities: _____

Reason for Leaving: _____

Hourly rate/salary: Start \$ _____ / _____ Final \$ _____ / _____

Employer: _____ Phone # _____

Address: _____

Job Title: _____ From: _____ To: _____

Supervisor and title: _____

Summarize the nature of work performed and job responsibilities: _____

Reason for Leaving: _____

Hourly rate/salary: Start \$ _____ / _____ Final \$ _____ / _____

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Address: _____

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Employer: _____ Phone # _____

Address: _____

Job Title: _____ From: _____ To: _____

Supervisor and title: _____

Summarize the nature of work performed and job responsibilities: _____

Reason for Leaving: _____

Hourly rate/salary: Start \$ _____ / _____ Final \$ _____ / _____

Educational Background			
Name and Location	Years Attended	Graduate?	Major/Study Focus & Degree Type
High School		Yes No	
College		Yes No	
Tech School		Yes No	
Other		Yes No	

References		
Name	Phone Number	Years Known

PLEASE READ CAREFULLY

In exchange for the consideration of my job application by Goodman Contracting, Inc. dba Goodman Electric (hereinafter also referred to as "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Goodman Electric for any specified period of definite duration, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned. I understand that no representative to the employer, other than an authorized officer, has the authority to make assurances to the contrary, and that relationship cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and Goodman Electric reserve the right to end the employment relationship at any time, with or without cause or reason, and without specified notice, except as may be required by law. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that upon discovery, the misrepresentation or omission of facts called for is cause for cancellation of this application and/or dismissal of employment at any time without any previous notice. I hereby give the Company permission to contact educational institutions, previous and/or current employers, references, and others, to verify the accuracy of the information contained in this application, and hereby release the Company and its representatives from any and all liability as a result of seeking, gathering and using such information, as well as all other persons, corporations or organizations for furnishing such information.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing during employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

Goodman Electric is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, marital status, national origin, citizenship, age, disability or veteran status. No question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on such or any other basis prohibited by local, state, or federal law. I understand it is this Company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. We assure you that your opportunity for employment with this Company depends solely on your skills, qualifications, personality, and/or character.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the Company and still wish to be considered for employment, it will be necessary to fill out a new application.

I represent and warrant that I have read and fully understand all of the foregoing and seek employment under these conditions.

Signature of Applicant: _____ **Date:** _____