

# PAQUETTE ELECTRIC COMPANY, INC.

## APPLICATION FOR EMPLOYMENT

PAQUETTE ELECTRIC COMPANY, INC.  
IS AN EQUAL OPPORTUNITY EMPLOYER,  
DEDICATED TO A POLICY OF  
NONDISCRIMINATION IN EMPLOYMENT  
ON ANY BASIS PROHIBITED BY LAW

APPLICATION MUST BE TYPED OR PRINTED IN BLUE OR BLACK INK. APPLICATIONS ARE NOT CONSIDERED BEYOND THIRTY DAYS FOLLOWING SUBMISSION.

### PERSONAL INFORMATION

TODAY'S  
DATE \_\_\_\_\_

#### NAME

LAST FIRST MIDDLE SOCIAL SECURITY NUMBER

#### PRESENT ADDRESS

STREET CITY STATE ZIP

#### PERMANENT ADDRESS

STREET CITY STATE ZIP

#### HOME PHONE NO.

OTHER PHONE NO.

ARE YOU 18 YEARS OR OLDER? YES  NO  DO YOU HAVE A VALID DRIVER'S LICENSE? YES  NO

ARE YOU EITHER A U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? YES  NO

### EMPLOYMENT DESIRED

POSITION DATE YOU CAN START SALARY DESIRED

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? WHERE? WHEN?

DO YOU HAVE FRIENDS OR RELATIVES WORKING HERE? IF YES, LIST NAME AND RELATIONSHIP TO YOU

CAN YOU TRAVEL IF YOUR JOB REQUIRES IT?

ARE YOU WILLING AND ABLE TO TRAVEL WITHIN A 60 MILE RADIUS OF YOUR HOME?

ARE YOU AVAILABLE TO WORK 2<sup>ND</sup> OR 3<sup>RD</sup> SHIFT WHEN NECESSARY?

<u>EDUCATION</u>	<u>NAME AND LOCATION OF SCHOOL ATTENDED</u>	<u>*NO. OF YEARS ATTENDED</u>	<u>*DID YOU ATTEND</u>	<u>GRADUATE</u>	<u>SUBJECTS STUDIED</u>
<u>GRAMMAR SCHOOL</u>					
<u>HIGH SCHOOL</u>					
<u>COLLEGE</u>					
<u>GRADUATE, TRADE, BUSINESS OR CORRESPONDENCE SCHOOL</u>					

**GENERAL**  
SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

SPECIAL SKILLS

TRADE LICENSES

<u>U.S. MILITARY OR NAVAL SERVICE</u>	<u>RANK</u>	<u>PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES</u>

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR?\* IF YES, PLEASE EXPLAIN.

**FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)**

EMPLOYER NAME

ADDRESS (STREET & No.)

<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE</u>	<u>TELEPHONE NUMBER</u>

JOB TITLE \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

DUTIES

EMPLOYER NAME

ADDRESS (STREET & No.)

<u>CITY</u>	<u>STATE</u>	<u>ZIP CODE</u>	<u>TELEPHONE NUMBER</u>

JOB TITLE \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

DUTIES

- STATE AND FEDERAL LAWS PROHIBIT DISCRIMINATION ON THE BASIS OF AGE
- \* CONVICTION DOES NOT AUTOMATICALLY DISQUALIFY AN APPLICANT FROM EMPLOYMENT

EMPLOYER NAME \_\_\_\_\_

ADDRESS (STREET & No.) \_\_\_\_\_  
CITY STATE ZIP CODE TELEPHONE NUMBER

JOB TITLE \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

DUTIES \_\_\_\_\_  
\_\_\_\_\_

EMPLOYER NAME \_\_\_\_\_

ADDRESS (STREET & No.) \_\_\_\_\_  
CITY STATE ZIP CODE TELEPHONE NUMBER

JOB TITLE \_\_\_\_\_ DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_

DUTIES \_\_\_\_\_  
\_\_\_\_\_

WHICH OF THOSE JOBS DID YOU LIKE BEST? \_\_\_\_\_

WHAT DID YOU LIKE MOST ABOUT THAT JOB? \_\_\_\_\_

EXCEPT FOR VACATIONS AND HOLIDAYS, HOW MANY WORK DAYS WERE YOU ABSENT DURING THE PAST YEAR?

\_\_\_ 0-5 DAYS; \_\_\_ 5-10 DAYS; \_\_\_ 10-15 DAYS; \_\_\_ 15-20 DAYS; \_\_\_ 21+ DAYS.

REFERENCES:

\_\_\_\_\_

GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME ADDRESS BUSINESS YEARS ACQUAINTED

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY

NAME ADDRESS PHONE NO.

**APPLICANT CERTIFICATIONS AND AGREEMENTS**

All employees at Paquette Electric Company, Inc. ("Company") are employed "at-will," which means that either the Company or I may terminate my employment at any time, for any reason or for no reason, with or without advance notice. **I UNDERSTAND THAT NOTHING STATED IN WRITING OR ORALLY BY THE COMPANY, INCLUDING BY ANY MANAGER, SUPERVISOR, OR ANY OTHER EMPLOYEE OF THE COMPANY, DURING THE INTERVIEW OR HIRING PROCESS, OR DURING MY EMPLOYMENT IF I AM HIRED, SHALL LIMIT THE COMPANY'S OR MY RIGHT TO TERMINATE MY EMPLOYMENT AT-WILL.**

I understand that a positive and properly confirmed drug test for controlled substances or refusal to submit to a drug test is grounds for denial or termination of employment. I voluntarily consent to a pre-employment drug test to be conducted by a drug-testing facility of the Company's choice. I understand that the results of the drug tests will be provided to the Company and hereby authorize the disclosure of the results of my pre-employment drug test to the Company.

I certify that the information on this job application is true and complete to the best of my knowledge. I understand that any willful omissions or falsifications will be reason for withdrawal of a job offer or termination of employment whenever the omission or falsehood is discovered. I authorize any investigation into the statements I have made in this application as necessary to arrive at an employment decision. In consideration of my employment, I agree to conform to the rules, regulations and policies of the Company with the understanding that such rules, regulations and policies (including those pertaining to compensation and benefits) may be changed by the Company at any time during my employment.

I have read, understand and agree to the foregoing.

\_\_\_\_\_  
Signature of Applicant

Date

## **NOTICE RE: PRE EMPLOYMENT AND EMPLOYMENT INQUIRIES**

In connection with your application for employment, Paquette Electric Company, Inc. ("Company") may make inquiries regarding your employment and credit histories, criminal and driving records and other related matters. In addition, if you are hired, during your employment with the Company, there may be times when the Company conducts investigations of workplace issues, such as claims of sexual harassment, workplace violence and theft. An investigation of you may be conducted by Company representatives or third parties. An investigation may include gathering information from you, your co-workers and others about your credit standing and history, criminal record, character, general reputation, medical information, personal characteristics or mode of living. A report may be prepared for our use as a result of such an investigation. Any investigative report that is generated may be used for any employment purpose, including decisions regarding your promotion, reassignment, discipline or continued employment with the Company.

We have no intent of being more intrusive than necessary when conducting lawful workplace investigations. The purpose is to protect our business interests. Although the Company may conduct a legitimate workplace investigation without your consent, we want to make certain that you fully understand and are committed to full compliance with the terms and conditions of both your application and, if applicable, your employment with the Company. Therefore, you are being asked to execute the disclosure and authorization form that appears on the following page.

Background checks and workplace investigations are necessary to ensure the Company's compliance with applicable laws and to maintain a safe, productive work environment. Therefore, if you do not execute the attached disclosure and authorization form, your application for employment will no longer be considered by the Company.

The disclosure and authorization form is not a guarantee of employment or continued employment. Nothing herein changes the Company's policy of employment at-will, meaning that either the Company or a Company employee may terminate the employment relationship at any time and for any reason, including no reason. This policy and the disclosure and authorization form shall be interpreted to be consistent with any changes in the law should such changes occur.

If you have any questions regarding this Company policy or the attached disclosure and authorization form, please contact John Paquette.

**CONSUMER REPORT DISCLOSURE AND AUTHORIZATION**

Paquette Electric Company, Inc. ("Company") has disclosed to me that it may request from a third party a consumer report, including an investigative consumer report, containing information collected about me. I understand that a consumer report or investigative consumer report may be obtained at any time during the application process and, if I am hired, during my employment with the Company, and may contain information regarding my employment, credit standing and history, character, general reputation, personal characteristics, medical information, mode of living and other related matters. I also understand that information provided in a consumer report or investigative consumer report may be used for any employment purpose, including my eligibility for employment, continued employment, promotion, reassignment or discipline. If the Company requests an investigative consumer report, I understand that I may request a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of my rights under the Fair Credit Reporting Act. If the Company decides to take any adverse action against me based on all or part of an investigative consumer report, I understand that I will receive a copy of the report before such action is taken.

I hereby authorize the Company to procure any consumer reports, including investigative consumer reports, as part of the Company's pre-employment background investigation. If I am hired, this authorization shall also serve as ongoing authorization for the Company to procure consumer reports, including investigative consumer reports, at any time during my employment.

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Signature: \_\_\_\_\_

If you are hired, a copy of this authorization will be retained in your personnel file.

**SAMPLE  
ADDENDUM TO EMPLOYMENT APPLICATION**

**VOLUNTARY**

IN ORDER TO MEET STATE AND FEDERAL REPORTING REQUIREMENTS,  
WE ARE REQUESTING THAT YOU VOLUNTARILY SUPPLY THE  
FOLLOWING INFORMATION. THIS DATA WILL NOT BE USED FOR  
DISCRIMINATORY PURPOSES AND WILL NOT BE CONSIDERED IN THE  
EVALUATION OF YOUR APPLICATION.

<b>A</b>	<b>SEX:</b>	<b>FEMALE</b> <input type="checkbox"/>	<b>MALE</b> <input type="checkbox"/>
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<b>B</b>	<b>RACE / ETHNIC DATA</b>
1.	<input type="checkbox"/> <b>BLACK</b> (not of Hispanic Origin): Persons having origins in any of the black racial groups of Africa.
2.	<input type="checkbox"/> <b>HISPANIC</b> : Persons of Mexican, Puerto Rican, Central or South American or other Spanish culture of origin, regardless of race.
3.	<input type="checkbox"/> <b>WHITE</b> (not of Hispanic Origin): Persons having origins in any of the original peoples of Europe, North America, or the Middle East.
4.	<input type="checkbox"/> <b>AMERICAN INDIAN OR ALASKAN NATIVE</b> : Persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
5.	<input type="checkbox"/> <b>ASIAN OR PACIFIC ISLANDER</b> : Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent or the Pacific Island. This area includes, for example, China, Japan, Korea, the Philippine Islands, and Samoa.