

Application for Employment

We are an equal opportunity employer dedicated to a policy of non-discrimination in employment on the basis of race, color, age, sex, religion, national origin or handicap.

Personal Information

Date: Social Security Number:

Name: Phone Number:

Address:

Date of birth: Male Female US Citizen? Yes No

Drivers License Number: State: Electrical License Number:

Have you ever been convicted of a felony? Yes No If yes, why?

Do you object to a background check? Yes No If yes, why?

Education

	Name, Location of School	Years Attended	Grad. Date	Subject of Study
High School				
College				
Trade School/Other				

Employment History

Please enter each job on a separate line. If completing from the Acrobat Reader, press return to create a new line.

Other

Do you smoke? Yes No

Do you wear glasses? Yes No

Are you color blind? Yes No

Please print and mail or fax this form to Sirois Electric.

Please be sure to attach a resume, if you have one.