



APPLICATION FOR EMPLOYMENT

Integrity Total Electric, Inc.
1794-1 N. Woodview
Nixa, MO 65714
(417) 724-8556
Integritytotalelectric.com

How were you referred to us: _____

Last Name _____ First Name _____ Middle Initial _____

Street Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Mobile/Other Phone Number _____ E-mail Address _____

Date available to start: _____ Social Security Number: _____ Wage Required: _____

Have you ever worked for this company? Yes No If yes, when? _____

Are you a citizen of the United States? Yes No If not, do you have work papers? Yes No

Have you ever pled "guilty" or "no contest" to or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering yes to these questions does not constitute an automatic rejection to employment. Date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be consideration.

Driver's license number if applicable to position: _____ State: _____

EDUCATION

High School _____ Address _____

of Years Completed: _____ Did you graduate: _____ Degree: _____

College/University _____ Address _____

of Years Completed: _____ Did you graduate: _____ Degree: _____

Major: _____ GPA: _____

Other: _____ Address: _____

of Years Completed: _____ Did you graduate: _____ Degree: _____

Major: _____ GPA: _____

REFERENCES:

Please furnish the names, addresses and phone numbers of two people to whom you are not related and by whom you have not been employed:

Name: _____ Phone Number: _____

Street Address _____ City _____ State _____ Zip Code _____

Name: _____ Phone Number: _____

Street Address _____ City _____ State _____ Zip Code _____

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:

PREVIOUS EMPLOYMENT (begin with most recent position):

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____
Firm: _____ Address: _____

Phone Number: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for references? Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____
Firm: _____ Address: _____

Phone Number: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for references? Yes No

Dates of Employment: From ___/___/___ To ___/___/___ Position(s) Held: _____
Firm: _____ Address: _____

Phone Number: _____ Supervisor: _____ Title: _____

Responsibilities: _____

Starting Salary and Title: _____ Ending Salary and Title: _____

Reason for Leaving: _____

May we contact this employer for references? Yes No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

In the event I am employed. I understand that false or misleading information given on my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____