

Mid Valley Electric, Inc.
1180 South High Street Suite 100
Harrisonburg, VA 22801
(540) 433-6815 Fax (540) 433-5599
Residential, Commercial, and Industrial Contractors
DCJS # 11-10005 Contractor's License 2705-036312A

Application for Employment

Name: _____ Date: _____

Address: _____

Phone Number: _____

If hired, can you provide the documents required to verify that you are authorized to work in the U.S.? _____

Do you have a valid Driver's License? _____ Do you own your own hand tools? _____

Highest level of education completed? _____ Vocational Training: _____

Position applied for: _____ Date you can start: _____ Salary Desired: _____

Do you have any restrictions that would keep you from performing the tasks listed in your job description? _____
If yes please list _____

Please list any additional information that relates to your ability to perform the job for which you have applied.
Such as cards or licenses, professional memberships, hobbies, etc.

U.S. Military Service: _____ Branch of Service: _____
Training and Experience Received: _____

Please complete the experience form on the back of this application.

I understand that the employer follows an employment-at-will policy; meaning that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States, and I must show the employer documents that will prove this.

I understand that the company will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all the statements herein are true and I understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Your Signature: _____

Work Experience:

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer Info Name: _____ Address: _____ Phone: _____ Job Title: _____ Supervisor's Name: _____ Reason for Leaving: _____ May We Contact? YES or NO	Dates of Work	Work Performed _____ _____ _____ _____ _____ _____ _____
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Comments : Include any explanation of any gaps in employment: