EMPLOYMENT APPLICATION

An Equal Opportunity Employer

ACDC Acquisition LLC dba ACDC Air Conditioning (hereinafter referred to as "ACDC" or "the Company") is an equal opportunity employer. ACDC does not discriminate in employment on account of race, color, religion, national origin, citizenship, status, ancestry, age, sex (including sexual harassment), sexual orientation, genetic information, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for ACDC to hire me. If I am hired, I understand that either ACDC or I can terminate my employment at any time and for any reason, with or without cause and with or without prior notice. I understand that no representative of ACDC has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to ACDC true and complete information on this application. No requested information has been concealed. I authorize ACDC or its agents to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

This application will remain open only for 60 days from the date signed/dated below or until the position is filled.

Name (First	t, Middle, Last):		
Address: _		(Street)	
_	(City)	(State)	(Zip Code)
Social Secu	rity #	E-mail Ado	lress
Home Telephone #		Cell Phone	#
Position(s)	Desired:		

PERSONAL INFORMATION:

Can you perform the essential functions of the position(s) for which you are applying? Yes \square No \square If no, please explain (if you have any questions as to what functions are applicable to the positions for which you are applying, please ask the interviewer before you answer this question)

ACDC EMPLOYMENT APPLICATION, CONTINUED

When would you be available to begin work? _____

Are you 18 years or older? Yes D NO (If no, you may be required to provide authorization to work)

Are you legally authorized to work in the United States? Yes \square No \square

Are you available to work flexible hours, including evenings, weekends, and overtime if needed? Yes
No
If no, please explain:

Are you willing to travel if needed? Yes \square No \square If no, please explain:

Have you previously applied or been employed at any ACDC location? Yes \square No \square If yes, what location and what position?

Do you have any relatives or friends who work for the Company? Yes
No If yes, who, and what position?

EDUCATION:						
		# of Years	Degree	Subject or		
Na	me and Location of School	Attended	Received	Major Studied		
High						
School						
College						
College						
Technical						
U.S.						
Military						
•						
Other						

ACDC EMPLOYMENT APPLICATION, CONTINUED

EMPLOYMENT HISTORY:

Include your last ten (10) years of employment history, including periods of unemployment or military service, starting with the most recent and working backward in time. *Incomplete* information could disqualify you from further consideration.

From:	То:	Employer Name:	Telephone:
Job Title	1	Address	I
Immediate supervisor and title:		Work performed and job responsibilities:	
Reason for lea	ving:		Salary/Hourly Rate:

Can we contact this employer? YES

		NO	
From:	To:	Employer Name:	Telephone:
Job Title		Address	
Immediate supervisor and title:		Work performed and job responsibilities:	
Reason for le	aving:		Salary/Hourly Rate:

Can we contact this employer? YES NO

From:	To:	Employer Name:	Telephone:
Job Title		Address	
Immediate supervisor and title:		Work performed and job responsibilities:	
Reason for lea	ving:		Salary/Hourly Rate:

Can we contact this employer? YES

		NO	
From:	To:	Employer Name:	Telephone:
Job Title		Address	
Immediate supervisor and title:		Work performed and job responsibilities:	
Reason for lea	ving:		Salary/Hourly Rate:

Can we contact this employer? YES NO

Please indicate which employer(s) you do NOT wish contacted:

ACDC EMPLOYMENT APPLICATION, CONTINUED

ACHIEVEMENTS/ORGANIZATIONS/SKILLS:

(Please omit if resume is attached or if listing the organization, character or association would reveal their member's race, religion or nationality).

Scholastic honors, scholarships and memberships in clubs, organizations or other groups such as professional societies, school, civic or athletic participation. (Please note past or present and offices held, or any leadership experiences).

List technical and professional certifications and briefly describe (include hobbies, interests, patents, publications, etc).

Please list any pertinent skills, abilities or related experiences (include computer proficiencies, office skills, etc).

REFERENCES (NON-RELATIVE):

List three (3) references, <i>preferably supervisors</i> , each of whom can effectively evaluate your training, experience and capabilities.						
Name		Name		Name		
Phone		Phone		Phone		
Address		Address		Address		
City, State		City, State		City, State		
Occupation		Occupation		Occupation		
Professional Relationship	Years Known	Professional Relationship	Years Known	Professional Relationship	Years Known	

I attest that this application for employment is complete and accurate to the best of my knowledge, and understand that any misstatement or omission of material fact will be sufficient cause for denial of consideration for employment or discharge if hired.

I have read, understand and agree to the above.

Applicant's Signature _____ Date _____