



Bonland Employment Application:

Name (First, Middle, Last):

Have you ever worked under another name? If Yes, what name:

What position are you applying for?

When are you available?

Phone Number:

E-Mail:

Salary or wages expected:

Present address:

Street

City

State

Zip

Period of residence?

Previous address, if less than 12 months:

Street

City

State

Zip

Period of residence?

PROFESSIONAL REFERENCES

(1) Name

Occupation

Address

Phone Number

(2) Name

Occupation

Address

Phone Number

(3) Name

Occupation

Address

Phone Number

U.S. MILITARY SERVICE

Veteran of U.S. Armed Forces? Yes

If Yes:

Branch: Serial Number:

Highest Rank:

Service School and other special training:

EDUCATIONAL DATA

COLLEGE

Name and Address of Institution:

Dates: From To Graduated:

Degree Received: Average Grades:

Service School and other special training:

GRADUATE SCHOOL

Name and Address of Institution:

Dates: From To Graduated:

Degree Received: Average Grades:

Service School and other special training:

TRADE, BUSINESS, NIGHT or CORRESPONDENCE

Name and Address of Institution:

Dates: From To Graduated:

Degree Received: Average Grades:

Service School and other special training:

OTHER

Name and Address of Institution:

Dates: From To Graduated:

Degree Received: Average Grades:

Service School and other special training:

EMPLOYMENT RECORD

Please be accurate and give a full and complete record of your employment. (Omit military service). Begin with present or last position.

Present Employer:

Nature of Business:

Date Employed:

Start \$:

Present \$:

Your Job Title:

Describe Your Duties:

Immediate Supervisor - Name:

Title:

Reason for Leaving:

Are you presently employed?

If No, how long have you been unemployed? (months):

If presently employed, when and how do you suggest we contact your present employer?

PREVIOUS EXPERIENCE

Firm Name:

Nature of Business:

Employed From:

Employed To:

Starting \$:

Ending \$:

Your Job Title:

Describe Your Duties:

Immediate Supervisor - Name:

Title:

Reason for Leaving:

PREVIOUS EXPERIENCE

Firm Name:

Nature of Business:

Employed From:

Employed To:

Starting \$:

Ending \$:

Your Job Title:

Describe Your Duties:

Immediate Supervisor - Name:

Title:

Reason for Leaving:

OTHER

What accomplishment has given you the greatest satisfaction?

What do you feel is your greatest asset?

Why do you want to work for this company?

What do you feel you will contribute to this company?

Current hobbies:

What do you want to be doing 10 years from now?

What has been your most interesting work?

What made it interesting to you?

What periodicals do you read regularly?

Any outside business activities? Describe:

How did you learn about the job for which you are applying?

AFFIDAVIT (Please read carefully)

It is the policy of Bonland Industries, Inc. to employ personnel on the basis of an individual's qualifications. Selections are made without regard to race, color, religion, sex, national origin, marital status, sexual orientation, citizenship status, age, handicap or status as a disabled veteran or a veteran of the Vietnam era except where age and sex are essential bonafide occupational requirements or where handicap is a bonafide occupational disqualification.

I authorize without liability investigation of all statements in this application. I authorize all schools which I attended and all previous employers to furnish to the Company my record, reason for leaving and all information they may have concerning me and I hereby release them and the Company from all liability for any damage whatsoever arising therefrom.

I authorize my neighbors, friends or others with whom I am acquainted or who are acquainted with me to furnish the Company with information used in connection with the evaluation of my qualifications as a prospective employee. I also authorize the making of a credit bureau investigation report whereby information may be obtained concerning my character, general reputation, personal characteristics and mode of living, whichever may be applicable. I understand I will be notified if such an investigative report is obtained and I will have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of information concerning the nature and scope of the investigation.

In processing this application, and during the course of employment, if hired, the Company may request verification of my driving record and insurance coverage. I authorize the Company to request such information and release them, the Motor Vehicle Division, and the insurance company from any action whatsoever arising therefrom.

I understand that proof of identity and work authorization will be required upon employment in accordance with federal regulations. I understand that in the event of my employment by the Company, it shall be sufficient cause for dismissal if any of the information I have given in this application is false or if I have failed to give any information herein requested. In the event of my employment by the Company, I agree to abide by all present and subsequently issued rules of the Company.

I have read and understand the above Affidavit.

Yes

Today's Date:

Please Note: You must click the "Yes" button stating that you have read and understand the above Affidavit before submitting this application.

TO SUBMIT:

- Save the completed application to your computer
- Create a new email message addressed to **HR@BonlandHVAC.com**
- Attach the saved application as an attachment and click **SEND**