



Central Arizona Supply

Plumbing and HVAC Distributor

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

SOCIAL SECURITY NUMBER _____

NAME _____
LAST FIRST MI

18 YEARS OR OLDER? YES NO

PRESENT ADDRESS _____
STREET CITY STATE ZIP

SAME AS PERMANENT? YES NO

DAYTIME PHONE NO () _____

EVENING PHONE NO () _____

U.S. CITIZEN OR AN ALIEN AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

EVER CONVICTED OF A FELONY? YES NO

IF YES PROVIDE DETAILS ON A SEPARATE PAGE.

EMPLOYMENT DESIRED

WORK DESIRED _____

DATE YOU CAN START _____

SALARY DESIRED _____

RELATED TO ANYONE IN OUR EMPLOY? YES NAME _____ NO

REFERRED BY _____

WORK OVERTIME? YES NO

EDUCATION	NAME AND LOCATION OF SCHOOL	DID YOU GRADUATE?	DEGREE/DATE OF MAJOR SUBJECTS	AVERAGE GRADE
HIGH SCHOOL				
COLLEGE, TRADE BUSINESS OR CORRESPONDENCE SCHOOL				
COLLEGE, TRADE BUSINESS OR CORRESPONDENCE SCHOOL				

RELEVANT COURSES, SKILLS, PROFESSIONAL LICENSES/ SOCIETIES, ETC. _____

FORMER EMPLOYERS

DATE MONTH AND YEAR	NAME, CITY, STATE AND PHONE NO. OF EMPLOYER	NAME AND TITLE OF YOUR SUPERVISOR	SALARY	POSITION	REASON FOR LEAVING
FROM TO	PHONE ()		START FINAL	START FINAL	
FROM TO	PHONE ()		START FINAL	START FINAL	
FROM TO	PHONE ()		START FINAL	START FINAL	

RELEVANT EXPERIENCE AND SKILLS (IE. TYPING SPEED, EQUIPMENT YOU CAN OPERATE, ETC.) _____

MAY WE CONTACT YOUR CURRENT EMPLOYER? YES NO

DURING THE LAST 10 YEARS, WERE YOU DISMISSED FROM ANY JOB, OR QUIT IN ANTICIPATION OF BEING DISMISSED? YES NO IF YES, EXPLAIN.

DRIVERS RECORD

DRIVERS LICENSE
NUMBER _____

STATE _____

HAVE YOU HAD ANY MOVING TRAFFIC VIOLATIONS IN THE LAST 3

YEARS OR HAS YOUR LICENSE BEEN REVOKED IN THE LAST 10 YEARS? YES NO

IF YES, EXPLAIN.

OTHER INFORMATION (FOR EXAMPLE, APPLICABLE MILITARY SERVICE)

I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, ANY MISREPRESENTATION OR OMISSION SHALL BE GROUNDS FOR DISMISSAL. I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, AND RELEASE ALL PARTIES FROM LIABILITY FROM ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME. I UNDERSTAND AND AGREE THAT, IF HIRED, EMPLOYMENT IS CONDITIONAL UPON SATISFACTORY COMPLETION OF A 90 DAY PROBATIONARY PERIOD AND MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE.

DATE _____ APPLICANT'S
SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____

REMARKS _____

POSITION IF HIRED	COMPANY/ LOCATION	START DATE	SALARY
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APPROVED BY _____ DATE _____