

# Employment Application



# Allen's

Air Conditioning, Inc.

**187 River Dr, Tuscumbia, Al 35674**

## ***Please Read Before Beginning***

The information requested on this application will be used to determine your qualifications for employment. All requested information must be provided. Answer completely and accurately.

Do not leave blanks. If a question does not apply or you do not have information, write "N/A" or "Not Applicable."

Once submitted, this document will be kept confidential and may remain the property of Allen's Air Conditioning, Inc.

Allen's is committed to a policy of equal employment opportunity. We will not discriminate on the basis of race, creed, color, sex, sexual orientation, age, marital status, national origin, citizenship, ancestry, physical or mental disability, veteran status, or any other legally protected basis.

Thank you for your interest in employment at Allen's.

# About Allen's

Allen's Air Conditioning, Inc was started 1982 by David Allen. We specialize in the residential service and replacement markets.

Allen's is an established contracting company with an excellent reputation for performance and as a place to work. The company cares about employees, and insists that employees care about customers.



Allen's normal office hours are 8:00 a.m. to 5:00 p.m., Monday through Friday. Service and installation personnel are expected to work in excess of 40 hours during periods of high demand and to remain on call from time-to-time. Employees are compensated accordingly.

## Benefits

Allen's offers very competitive pay and benefits. The benefits include:

- Paid Holidays
- Earned Paid Personal Time Off
- Social Security
- Paid Retirement
- Health Insurance
- Field Service Spiffs & Incentives
- Field Service Vehicle Usage
- Company Training
- External Training
- Workman's Compensation Insurance

# Personal Data

			Date _____		
_____		_____		_____	
First Name	Middle Name	Last Name	Social Security Number		
_____			_____	_____	_____
Street Address			City	State	Zip
_____					
E-Mail _____			May we contact you at your work phone?	Are you 18 years old or over?	If you are under 18, do you have a work permit?
Home Phone _____	Mobile Phone _____	Work Phone _____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

# Position Desired

Type of work you are applying for:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Laborer                | <input type="checkbox"/> Maintenance Technician  | <input type="checkbox"/> Dispatch             |
| <input type="checkbox"/> Technician's Assistant | <input type="checkbox"/> Installation Technician | <input type="checkbox"/> Customer Service Rep |
| <input type="checkbox"/> Shop                   | <input type="checkbox"/> Service Technician      | <input type="checkbox"/> Office               |
| <input type="checkbox"/> Sales                  |  | <input type="checkbox"/> Managerial           |

Type of schedule:

- |                                    |  |
|------------------------------------|--|
| <input type="checkbox"/> Part-Time | <input type="checkbox"/> Regular                 |
| <input type="checkbox"/> Full-Time | <input type="checkbox"/> Temporary               |
|                                    | <input type="checkbox"/> Seasonal (i.e., summer) |
|                                    | <input type="checkbox"/> Any                     |

Other (describe): \_\_\_\_\_

Date Available: \_\_\_\_\_

Have you ever been convicted of a felony (Do not identify convictions that have been sealed, expunged, dismissed, pardoned, or otherwise eradicated)?

Yes  No

Are you currently on "lay off" status and subject to a recall

Yes  No

# Education

School Name	Location	Years Attended	Years Completed (Circle)				Diploma Or Degree (Circle)		Major Field of Study
			9	10	11	12	Y	N	
_____	_____	_____							_____
_____	_____	_____							_____
_____	_____	_____							_____
_____	_____	_____							_____
_____	_____	_____							_____

Post Graduate Training Or Certifications	Date	Description
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

# Technical/Computer Skills

## Office/Software

- Microsoft Publisher
- Microsoft Excel
- Microsoft Access
- Microsoft Word
- QuickBooks
- Adobe Photoshop
- Peachtree Accounting
- Switchboard
- Bookkeeping
- 10-Key
- Other: \_\_\_\_\_

## HVAC

- |                          |                          |                       |
|--------------------------|--------------------------|-----------------------|
| Service                  | Install                  |                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Air Conditioning      |
| <input type="checkbox"/> | <input type="checkbox"/> | Air Distribution      |
| <input type="checkbox"/> | <input type="checkbox"/> | Air to Air Heat Pump  |
| <input type="checkbox"/> | <input type="checkbox"/> | Gas Warm Air Heating  |
| <input type="checkbox"/> | <input type="checkbox"/> | Heat Load Calculation |
| <input type="checkbox"/> | <input type="checkbox"/> | Metal Fabrication     |
| <input type="checkbox"/> | <input type="checkbox"/> | Light Refrigeration   |
| <input type="checkbox"/> | <input type="checkbox"/> | Control Systems       |

## Job Skills

- Brazing
- Welding
- Electrical
- Sheet Metal
- Carpentry
- Other: \_\_\_\_\_

## License

- HVAC Contractor
- Gas Journeyman
- Master Gas
- Electrical
- NATE Certification
- Other: \_\_\_\_\_

# Work History

Employer (Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	If Still Employed By This Company, May We Contact Your Supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Employer Address	
		Telephone Number, Including Area Code	
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

Employer (Next Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	Employer Address	
		Telephone Number, Including Area Code	
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

Employer (Next Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	Employer Address	
		Telephone Number, Including Area Code	
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

Employer (Next Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	Employer Address	
		Telephone Number, Including Area Code	
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

# References

Please list the names and contact information of two business or professional references we may contact. Do not list relatives as references. School or volunteer related references may be listed.

**1.**

_____	_____
Name	Phone Number, Including Area Code
_____	_____
Address	How Acquainted

**2.**

_____	_____
Name	Phone Number, Including Area Code
_____	_____
Address	How Acquainted

Please list the names and contact information of two personal references, who have known you for at least five years, who we may contact. Do not list relatives. School or volunteer related references may be listed.

**1.**

_____	_____
Name	Phone Number, Including Area Code
_____	_____
Address	How Acquainted

**2.**

_____	_____
Name	Phone Number, Including Area Code
_____	_____
Address	How Acquainted

# Work Availability

Do you have any objections to working overtime?

Yes  No

Do you have any objections to being on call?

Yes  No

If needed, would you be able to work overtime with little notice?

Yes  No

Can you work on Saturday?

Yes  No

Can you work on Sunday?

Yes  No

# Supplemental Information

Please describe any additional training, qualifications, or other factors we should be aware of.

---

---

---

---

---

---

---

---

How do you feel you can contribute to the Allen's team?

---

---

---

---

---

---

---

---

Why do you want to work at Allen's?

---

---

---

---

---

---

---

---

# Applicant's Statement

## APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

### **\*PLEASE READ CAREFULLY BEFORE SIGNING\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Allen's Air Conditioning, Inc (hereinafter referred to as "Allen's Air Conditioning, Inc") that such employment with Allen's Air Conditioning, Inc is at will, for no specified duration and may be terminated by either Allen's Air Conditioning, Inc or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of Allen's Air Conditioning, Inc or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of Allen's Air Conditioning, Inc except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of Allen's Air Conditioning, Inc.

In consideration for employment with Allen's Air Conditioning, Inc, if employed, I agree to conform to the rules, regulations, policies and procedures of Allen's Air Conditioning, Inc at all times and understand that such obedience is a condition of employment. I understand that due to the nature of Allen's Air Conditioning, Inc business, attendance and punctuality are considered essential requirements of every job at Allen's Air Conditioning, Inc and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with Allen's Air Conditioning, Inc, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to Allen's Air Conditioning, Inc and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.**

---

**Signature**

**Date**

**Allen's Air Conditioning, Inc IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.**