

EMPLOYMENT APPLICATION

Please complete the entire application.

1.

Employer Information

Employ	er:	Gibson Electric Power Services
Address	:	2695 NW 4th Street
City/Sta	te/ZIP:	Ocala, Florida 34471
Telepho	ne:	352-351-0145
It is the	policy of Gibs	on Electric Power Services to provide equal employment opportunities to all applicants and employees without regard to
any lega	ally protected st	atus such as race, color, religion, gender, national origin, age, disability or veteran status.
2 .	Applicant Info	rmation
		
Home A		
City/Sta		
	of years at this	
-		Evening phone:
Mobile		
	ecurity Number	
Driver's	License (State/	Number):
3 .	Emergency Co	ntact
Who sh	auld ba controt	ed if you are involved in an emergency?
Contact		ed if you are involved in an emergency?
		
	iship to you:	
Address		
_	te/ZIP:	Turning at any
Daytime	phone:	Evening phone:
	Calami Danima	
5.	Salary Desired	: \$ per
6.	Who referred s	you to our company?
0.		ny friends or relatives who work here? If yes, please list here:
	Do you nave a	ny menos or relatives who work here: if yes, prease his here.
7.	Are you at leas	rt 18 years old? Yes No

8 .	How will you get to work?						
9.	If you are offered employment, when would you be available to begin work?						
10 .	If hired, are you able to submit proof that you are employment in the United States?	e legally eligible for Yes	No				
11 .	Are you able to perform the essential functions of without reasonable accommodation?		No				
	What reasonable accommodation, if any, would	you request?					
12 .	Applicant's Skills						
	those skills that you have. List any other skills that he number which corresponds to your ability for e						
			Ability				
			or				
Sk	ill	Years of Experience	Rating				
[]	Electrical	read of Emperedice	1 2 3 4 5				
[]	Contruction		1 2 3 4 5				
[]	Communication Skills		12345				
[]	Physical performance requirements		12345				
[]	Filysical performance requirements		12345				
_			12345				
13 .	Applicant Employment History						
	ur current or most recent employment first. Please	list all jobs (including self-emp	loyment and military service) which you have he	eld,			
beginni	ng with the most recent, and list and explain any g	gaps in employment. If additiona	al space is needed, continue on the back page of	this			
applica	tion.						
Employ	ver Name:	Employer Name:					
Superv	isor Name:	Supervisor Name:					
Addres	s:	Address:					
City/St	ate/ZIP:	City/State/ZIP:					
Job Du	ties:	Job Duties:					
Reason	for Leaving:	Reason for Leaving	:				
Dates o	f Employment (Month/Year):	Dates of Employme	nt (Month/Year):				

College/University Name and	Address		
Did you receive a degree?	Yes	No	If yes, degree(s) received:
High School/GED Name and	Address		
Did you receive a degree?	Yes	No	
Other Training (graduate, tech	nnical, vocational):		
Please indicate any current pro	ofessional licenses (or certificati	ations that you hold:
Awards, Honors, Special Achi	ievements:		
15 References			
List any two non-relatives wh	o would be willing	to proviđe a	e a reference for you.
Name:			Name:
Address:			Address:
City/State/ZIP:			City/State/ZIP:
Telephone:			Telephone:
Relationship:			Relationship:
Please provide any of current employer:	her information tha	t you believ	eve should be considered, including whether you are bound by any agreement with any
			CERTIFICATION
			s truthful and accurate. I understand that providing false or misleading information will ent commences, immediate termination.
education. I authorize my form	mer employers and grades. I authorize	educational	rmer employers and educational organizations regarding my employment and all organizations to fully and freely communicate information regarding my previous sons designated as references to fully and freely communicate information regarding my
I HAVE CAREFULLY REAL) THE ABOVE CE	RTIFICATI	TION AND I UNDERSTAND AND AGREE TO ITS TERMS.

DATE

14 . Applicant's Education and Training

APPLICANT SIGNATURE