



SOUTHERN HEAT EXCHANGER

Employment Application

Write in Version

Office Use Only: (date/initials)

Database:
Initial Interview:
Orion:
Background request:
Work Reference:
Referred for interview:

Date: _____

Personal Information

First Name: _____ Middle Name: _____ Last Name: _____ Suffix: _____

Street Address: _____ City: _____ State: _____ ZIP: _____

How long have you lived at this address: _____

Home Phone: _____ Other phone/message phone: _____ Email address: _____

Social Security Number: _____ Driver's License Number: State _____ Number _____ Type _____

Previous address: (Street, City, State, ZIP): _____

How long did you live there? _____

Have you ever been convicted of a felony? Yes No Date: _____

If yes, please describe: _____

Position Applied For: _____ Pay rate/Salary required: _____

Who do you know who works here? _____

Where did you learn about this job opportunity? _____

Where did you obtain this application? _____

Have you worked with us before: Yes No

Prior Position: Regular Temporary Reason for Leaving: _____

Southern Heat Exchanger Services
4206 Fidelity St, Houston, Texas 77029
Ph.: (281) 668-4916 Fax: (281) 673-1801
hr@sheco.com

Education and Training

School Name _____ Highest Grade _____ Major Subject _____

School Location _____ Did you graduate: Yes No

School Name _____ Highest Grade _____ Major Subject _____

School Location _____ Did you graduate: Yes No

School Name _____ Highest Grade _____ Major Subject _____

School Location _____ Did you graduate: Yes No

List dates and specific education, training or work experience that qualifies you for this position or for work at Southern Heat Exchanger (attach additional pages if needed).

State **what** specific type of training or experience, **where** you obtained the training or experience and **when** you obtained the training and experience.

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Name: _____ Social Security Number: _____

Employment History:

Applicant must account for all time for the past 7 years. Begin with the present and work backwards. If unemployed, in school, or in another situation for a period, please state.

| | |
|---|---------------------------|
| From Month/Year to Month/Year _____ | Reason for leaving: _____ |
| Employer Name & Type of Business: _____ | |
| Address (Street, City, State, ZIP): _____ | |
| Type of Employment (check all that apply): Regular Temporary Part Time Full Time Self-Employed | |
| Your Position: _____ Brief description of job duties: _____ | |
| Supervisor name: _____ Supervisor phone: _____ | |
| Last salary: \$ _____ per _____ May we contact this employer: Yes No | |

| | |
|---|---------------------------|
| From Month/Year to Month/Year _____ | Reason for leaving: _____ |
| Employer Name & Type of Business: _____ | |
| Address (Street, City, State, ZIP): _____ | |
| Type of Employment (check all that apply): <input type="checkbox"/> Regular <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Self-Employed | |
| Your Position: _____ Brief description of job duties: _____ | |
| Supervisor name: _____ Supervisor phone: _____ | |
| Last salary: \$ _____ per _____ May we contact this employer: Yes No | |

Emergency Contact Information

In case of Emergency Notify:

Name: _____

Address: _____

City/State: _____

Telephone number: _____ Other phone number: _____

Notice to Applicant

Southern Heat Exchanger Corp. is committed to a policy of equal employment opportunities for all persons regardless of race, sex, color, religion, national origin, ancestry, citizenship or lawful alien status, age, disability, marital status, family care leave status veteran status or U.S. Armed Forces Service. All applicants are considered on this basis.

Accommodation of Disability

I understand that I may be required to take an examination as part of the application process. In the event that I have a disability which might affect my ability to take such an examination, I will inform Southern Heat Exchanger of my disability in writing prior to the administration of the test and will request in writing that an accommodation be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. Southern Heat Exchanger Corp. reserves the right to require medical documentation, including a second opinion, concerning the need for any accommodation.

Probationary Period

I understand that all employees are hired on a probationary basis for sixty (60) days and that employment is conditional upon satisfactory performance.

Pre-Employment, Post-Offer Drug Screen

I understand that Southern Heat Exchanger Corp. has a policy of a drug and alcohol free workplace and that I may be required to submit to a drug/alcohol screening prior to employment, or when a reasonable suspicion exists that I am using or in the possession of drugs or alcohol while on company property or in company vehicles. I further understand that failure to comply with this policy, or to submit to required drug/alcohol screening, either prior to employment, or when a reasonable suspicion exists that I may be in possession of, or under the influence of drugs or alcohol, is ground for termination.

Other Information

I understand that nothing contained in the employment application or in the granting of an interview is intended to create an employment contract between Southern Heat Exchanger Corp. and myself for either employment or for the providing of any benefit. No promises regarding employment or conditions of employment have been made to me. If an employment relationship is established, I understand that I have the right to terminate my employment at any time for any reason or for no reason, and that Southern Heat Exchanger Corp. retained the right to terminate my employment at any time, with or without cause.

I understand that, if employed, policies and rules which are issued are not conditions of employment and that Southern Heat Exchanger Corp. may revise policies or procedures, in whole or in part, at any time.

I understand that this application will be kept on active file for 30 days from the date completed, after which time I would need to reapply in order to be considered for employment.

Certifications

By my signature below, I acknowledge that I have read and understand the information above. I also certify that information given by me in this application is true and correct in all respects and I agree that if the information given is found to be false or misleading in any way, it shall be considered sufficient cause for denial of employment or discharge from employment whenever discovered.

Signature of Applicant: _____

Date: _____

DISCLOSURE TO EMPLOYMENT APPLICANT

This is to notify you that a Consumer Report and/or Investigative Consumer Report will be conducted on you for employment purposes.

By signing the release below, I hereby authorize Southern Heat Exchanger Corp. to contact any and all corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, and military services to obtain information about my background including, but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history.

I authorize without reservation such corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county and federal courts, and military services to release information about my background including, but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history.

I believe to the best of my knowledge that all information I have provided is accurate, true and correct and that I fully understand the terms of the release.

Please print clearly:

Your Name: _____

Other Names Used: _____

Street Address: _____

City/State/Zip: _____

Date(s) degree(s) received, if applicable: _____

Social Security Number: _____

Driver's License Number and Issuing State: _____

Date of Birth: _____

Applicant Signature: _____ Date: _____

CONSENT TO PROCUREMENT OF CONSUMER CREDIT REPORT

I understand that, as a condition of my consideration for employment with Southern Heat Exchanger Corp., or as a condition of my continued employment with Southern Heat Exchanger Corp., Southern Heat Exchanger Corp. may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to Southern Heat Exchanger's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, Southern Heat Exchanger Corp. will provide me with a copy of any such report if the information contained in such a report is, in any way, to be used in making a decision regarding my fitness for employment with Southern Heat Exchanger Corp. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

Signature of Applicant/Employee

Date

Printed Name of Applicant/Employee: _____

