

NOTICE-Our company has a drug-screening policy. All new employees will be tested.

SNELL SERVICES, INC.

2220 West Front Street - P.O. Box 629
North Platte, NE 69101

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position Applied For	Date of Application
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How did you learn about us?

Advertisement Friend Walk-In
 Employment Agency Relative Other: _____

Last Name	First Name	Middle Name
Address	City	State Zip
Telephone Number(s)	Social Security Number	

If you are under 18 years of age, can you provide the required proof of your eligibility to work? __Yes __No

Have you ever worked for us before? __Yes __No | If yes, when? ___/___/___

Have you been convicted of a felony within the last 7 years? ___/___/___ | If yes, please explain:

(Conviction of a felony may be relevant if job-related, but does not necessarily bar you from employment)

Are you employed now? __Yes __No | When would you be available for work? ___/___/___

Can you travel if the job requires it? __Yes __No | Comment: _____

Do you hold a current and valid driver's license? __Yes __No | If yes, list State and # _____

Are you eligible for standard-rate auto insurance? __Yes __No

EDUCATION

School	Name and City	No. Years	Graduated?	Course or Major
High School				
College				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude memberships which reveal race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

APPLICATION FOR EMPLOYMENT - ELECTRICIAN

CLASS OF LICENSE CURRENTLY HELD:			
<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Class A Master Class B Master Class A Journeyman Class B Journeyman	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Installer Special Apprentice None

PRACTICAL ELECTRICAL EXPERIENCE			
CATEGORY	TIME IN MONTHS	TYPE OF EXPERIENCE	
		Estimate the percentage of time spent in each type of work.	
Apprentice		Residential (4 units or less)	%
Journeyman		Commercial	%
Job Foreman		Industrial	%
Job Supt. *		Total	100%
Estimator		Estimate your experience in months in:	
Other		Motor Control Equipment	Mos.
		Fire Alarm/Sound/Nurse Call/Systems	Mos.
		HVAC/Refrigeration Equipment	Mos.

OTHER EXPERIENCE		
Sizes of Conduit Run: PVC ___ Inch Rigid ___ Inch EMT ___ Inch	Hydraulic Benders Operated: 1/2 to 2" ___ 2 1/2 to 4" ___	Wire Pulling Equipment Yes ___ No ___

* SUPERVISORY EXPERIENCE			
Name of Project	Location	Type of Project	Approximate \$ Size
			# Persons Supervised

OTHER QUALIFICATIONS
 Summarize special job-related skills and qualifications acquired from employment and other experiences.

APPLICATION FOR EMPLOYMENT - HVAC/SHEET METAL TECHNICIAN

CLASS OF LICENSE CURRENTLY HELD:	
Technician <input type="checkbox"/> Apprentice <input type="checkbox"/> None <input type="checkbox"/>	<div style="text-align: right; margin-bottom: 5px;">Cities & States</div> <hr/> <hr/> <hr/>

PRACTICAL HVAC/SHEET METAL EXPERIENCE			
CATEGORY	TIME IN MONTHS	TYPE OF EXPERIENCE	
		Estimate the percentage of time spent in each type of work.	
Apprentice		Residential (4 units or less)	%
Technician		Commercial	%
Job Foreman		Industrial	%
Job Supt. *		Total	100%
Estimator		Estimate your experience in months in:	
Other		Copper Piping	Mos.
		Steel Piping	Mos.
		Duct Fabrication	Mos.
		Duct Installation	Mos.
		Boilers & Chillers	Mos.
		Service Work	Mos.

EQUIPMENT OPERATED	
Reclaim <input type="checkbox"/> Other <input type="checkbox"/>	Any other special equipment: <hr/> <hr/>

* SUPERVISORY EXPERIENCE			Approximate \$ Size	# Persons Supervised
Name of Project	Location	Type of Project		

OTHER QUALIFICATIONS
 Summarize special job-related skills and qualifications acquired from employment and other experiences.

APPLICATION FOR EMPLOYMENT - PLUMBER

CLASS OF LICENSE CURRENTLY HELD:	
Master <input type="checkbox"/> Journeyman <input type="checkbox"/> None <input type="checkbox"/>	<div style="text-align: right; margin-bottom: 10px;">Cities & States</div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

PRACTICAL PLUMBING EXPERIENCE			
CATEGORY	TIME IN MONTHS		TYPE OF EXPERIENCE
			Estimate the percentage of time spent in each type of work.
Apprentice			Residential (4 units or less) %
Journeyman			Commercial %
Master			Industrial %
Job Foreman			Total 100%
Job Supt. *			Estimate your experience in months in:
Estimator			Copper Piping Mos.
Other			Steel Piping Mos.
			Welded Piping Mos.
			Waste & Vent Mos.
			Boilers & Chillers Mos.
			Service Work Mos.

EQUIPMENT OPERATED	
Backhoe <input type="checkbox"/> Bobcat <input type="checkbox"/> Other <input type="checkbox"/>	Any other special equipment: <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>

* SUPERVISORY EXPERIENCE			Approximate \$ Size	# Persons Supervised
Name of Project	Location	Type of Project		

OTHER QUALIFICATIONS
Summarize special job-related skills and qualifications acquired from employment and other experiences.
