

# EMPLOYMENT APPLICATION

**Christian Brothers Mechanical, Inc.**  
**585 Factory Shoals Road**  
**Austell, GA 30168 (770) 489-0894**  
**www.christianbrothersmechanical.com**

Applicants Name (Last, First, Middle Initial): \_\_\_\_\_

**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 remain the property of Christian Brothers Mechanical, Inc..

Christian Brothers Mechanical, Inc. 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 pro-

Application Date: \_\_\_\_\_

# Company Information

Christian Brothers Mechanical, Inc. targets the residential and light commercial service and replacement markets. The company does work with several custom home builders and will perform new installations for these companies.

Christian Brothers Mechanical, Inc. is a 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.

Christian Brothers Mechanical, Inc.'s office hours are 8:00 a.m. to 4:30 p.m., Monday through Friday. Standard service hours are from 7:00 a.m. to 7:00 p.m. Monday through Saturday. Service 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.

New hires must provide verification of the right to work in the United States. The company performs background checks on all new hires. New employees work on probation for \_\_\_\_ days.

## Benefits

Christian Brothers Mechanical, Inc. offers very competitive pay and benefits.

The benefits include the following checked items and may not be effective immediately:

- |   |  |
|---|--|
| <input type="checkbox"/> Paid Holidays (_____per year)  | <input type="checkbox"/> Long-Term Disability              |
| <input type="checkbox"/> Paid Personal Time Off (____days for every month worked during the Year 1 through 5, _____days for every month worked after 5 years) | <input type="checkbox"/> Employee Suggestion Program       |
| <input type="checkbox"/> Social Security  | <input type="checkbox"/> Field Service Spiffs & Incentives |
| <input type="checkbox"/> Paid Retirement  | <input type="checkbox"/> Field Service Vehicle Usage       |
| <input type="checkbox"/> Workman's Compensation Insurance   | <input type="checkbox"/> Field Service Safety Awards       |
| <input type="checkbox"/> Health Insurance   | <input type="checkbox"/> Field Service Tool Allowance      |
| <input type="checkbox"/> Life Insurance   | <input type="checkbox"/> Field Service Uniform Allowance   |
|   | <input type="checkbox"/> Company Training                  |
|   | <input type="checkbox"/> External Training                 |

# Personal Data

Date \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Last Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip \_\_\_\_\_

May we contact you at your work phone?

Yes  No

Are you 18 years old or over?

Yes  No

If you are under 18, do you have a work permit?

Yes  No

Home Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Have you worked for us before?

Yes  No

\_\_\_\_\_  
If yes, when?

\_\_\_\_\_  
If yes, under what name?

\_\_\_\_\_  
If yes, what position(s) did you hold?

# Position Desired

Type of work you are applying for:

Laborer

Maintenance Technician

Dispatch

Technician's Assistant

Installation Technician

Customer Service Rep

Shop

Service Technician

Office

Sales

Service Technician

Managerial

Type of schedule:

Part-Time

Regular

Full-Time

Temporary

Days

Seasonal (i.e., summer)

Nights

Weekends

Any

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

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

How did you select Christian Brothers Mechanical, Inc. (Please name any employee, advertisement, etc.)? \_\_\_\_\_

If you receive a conditional offer of employment, can you provide verification of your identity and legal right to work in the United States?

Yes  No

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

Yes  No

Do you have any physical limitations that may inhibit your ability to perform the tasks required of the position you are applying for?

Yes  No

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

Yes  No

\_\_\_\_\_  
If yes, please explain

# Education

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

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

# Technical/Computer Skills

## Office/Software

- Microsoft Publisher
- Microsoft Excel
- Microsoft Access
- Microsoft Word
- Quick Books Pro
- Adobe Photoshop
- Switchboard
- 10-Key
- Bookkeeping
- Load Calculation
- 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"/> | Duct Fabrication         |
| <input type="checkbox"/> | <input type="checkbox"/> | HVAC Maintenance         |
| <input type="checkbox"/> | <input type="checkbox"/> | Hydronic Gas Heating     |
| <input type="checkbox"/> | <input type="checkbox"/> | Hydronic Oil Heating     |
| <input type="checkbox"/> | <input type="checkbox"/> | Light Refrigeration      |
| <input type="checkbox"/> | <input type="checkbox"/> | Commercial Refrigeration |
| <input type="checkbox"/> | <input type="checkbox"/> | Chillers                 |
| <input type="checkbox"/> | <input type="checkbox"/> | _____                    |
| <input type="checkbox"/> | <input type="checkbox"/> | _____                    |

## Job Skills

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

## Licenses

- HVAC Contractor
- Plumbing Journeyman
- Master Plumber
- Electrical
- Other: \_\_\_\_\_

# Work History

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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	

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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	

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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	

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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	

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# 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

# Emergency Contact

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Address

\_\_\_\_\_  
Phone Number, Including Area Code

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

# Driving Information

Only applicants for technician positions that require the use of company vehicles should complete the following. Other applicants should skip this section.

Do you have a current driver's license?

Yes  No

\_\_\_\_\_

State

\_\_\_\_\_

License

\_\_\_\_\_

Expiration Date

Has your driver's license ever been suspended for any reason?

Yes  No

\_\_\_\_\_

If Yes, Please Explain

Do you have personal automobile insurance?

Yes  No

\_\_\_\_\_

Insurance Company

Has your personal automobile insurance ever been cancelled?

Yes  No

\_\_\_\_\_

If Yes, Please Explain

List all moving traffic violations from the past five years.

\_\_\_\_\_

Offense

\_\_\_\_\_

Date

\_\_\_\_\_

Location

\_\_\_\_\_

Offense

\_\_\_\_\_

Date

\_\_\_\_\_

Location

\_\_\_\_\_

Offense

\_\_\_\_\_

Date

\_\_\_\_\_

Location

\_\_\_\_\_

Offense

\_\_\_\_\_

Date

\_\_\_\_\_

Location

\_\_\_\_\_

Offense

\_\_\_\_\_

Date

\_\_\_\_\_

Location

# 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.

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How do you feel you can contribute to the Christian Brothers Mechanical, Inc. team?

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Why do you want to work at Christian Brothers Mechanical, Inc.?

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# Applicant's Statement

By signing this application, I agree to the following:

\_\_\_\_\_  
Acknowledge By  
Initialing

I declare that the information I have provided in this employment application is complete and truthful to the best of my knowledge. I acknowledge and agree that omitting information or providing false information on this application would be grounds for refusal to hire or termination, if hired.

\_\_\_\_\_  
Acknowledge By  
Initialing

I understand that nothing in this employment application, nor anything said to me by any representative of Christian Brothers Mechanical, Inc. during the interview process or afterwards shall constitute a contract of employment or other employment rights.

\_\_\_\_\_  
Acknowledge By  
Initialing

I authorize Christian Brothers Mechanical, Inc. to investigate and validate the information provided on this application and give permission to any people or organizations listed on this application to provide Christian Brothers Mechanical, Inc. with any and all information regarding prior employment, education, and other pertinent information they might have, whether personal or otherwise. I release all parties from any liability for damage that might result from the utilization of this information.

\_\_\_\_\_  
Acknowledge By  
Initialing

If hired, I authorize Christian Brothers Mechanical, Inc. to provide my employment record and other information surrounding my employment to prospective employers, government agencies, or other parties with an interest that Christian Brothers Mechanical, Inc. at its sole discretion deems appropriate.

\_\_\_\_\_  
Acknowledge By  
Initialing

If I am employed by Christian Brothers Mechanical, Inc., I agree to conform to Christian Brothers Mechanical, Inc. rules, regulations, and policies as described in the employee handbook and other documents. I understand that these rules and regulations may be modified, discarded, or amended by Christian Brothers Mechanical, Inc., at any time, without prior notice, at the sole discretion of Christian Brothers Mechanical, Inc. management. I agree to conform to any changes in Christian Brothers Mechanical, Inc. rules, regulations, and policies.

\_\_\_\_\_  
Acknowledge By  
Initialing

If employed by Christian Brothers Mechanical, Inc., I acknowledge that my employment is completely "at will." My employment with Christian Brothers Mechanical, Inc. may be terminated with or without cause, at any time, by me or by Christian Brothers Mechanical, Inc.

\_\_\_\_\_  
Acknowledge By  
Initialing

I acknowledge that no representative or employee of Christian Brothers Mechanical, Inc. has the authority to create or enter into an agreement for employment with me for a set time period or assurance of any benefits beyond the terms and conditions described in the employee handbook.

\_\_\_\_\_  
Acknowledge By  
Initialing

I agree to a physical examination, psychological examination, and drug testing before the start of employment or following employment, at the discretion of Christian Brothers Mechanical, Inc..

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date