EXCEL MECHANICAL AND CONST.

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We are an Equal Opportunity Employer and fully subscribe to the principles of Equal Employment Opportunity. Applicants and/or employees are considered for hire, promotion and job status, without regard to race, color, religion, creed, sex, marital status, national origin, age, physical or mental disability. Name ____Date of application_____ LAST FIRST MIDDLE _____City _____State ____Zip__ Address Telephone Email: 1. GENERAL INFORMATION: Are you able to perform the essential job functions of the position for which you are applying with or without reasonable accommodation? Yes No Have you been convicted of any felonies other than minor traffic violations during the past seven years? (A criminal record or a conviction will not automatically bar employment, but will be considered only as it reasonably relates to your fitness to perform in the position for which you are applying.) No___ Yes___ If yes, explain: 2. EDUCATION & TRAINING: Circle last grade completed - Grade 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Maior Course Graduated or Name & Address of School Studied: degree Y or N Last High School Attended/Address: College or University: Other School (Technical, Vocational, Graduate, etc.) /Address List any scholarships, academic honors, awards or special achievements: **3. SKILLS** Please list any skills you have that are appropriate for the position you are applying for: If required, will you work? Rotating shifts? YES___NO ___Saturdays YES___NO___ Overtime? YES___ NO__ Sundays YES__ NO__ Position applying for, be specific: _____ Salary Requirements per hour \$ ____ per month_____ State fully why you believe you are qualified for this position:

as a volunteer or as a hobbyist trace, etc. need not be mentione	•	e position(s) you are s	seeking. Names or orga	inizations designati	ng religion,
DATE YOU CAN STAR	T:				
EMPLOYMENT HISTOR	RY				
Starting with your PRESENT or the past TWO employers. If curr	ently employed, may we		er? Yes No	/MENT for at least	
FULL NAME OF COMPANY:		(AREA CODE) TELEPHONE :_		SALARY	EMPLOYED
STREET ADDRESS:	CITY:	STATE:	ZIP:	BEGIN END	FROM TO MO/YR MO/YF
NAME & TITLE OF SUPERVISOR:	TITLE OF YO	UR POSITION:			
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:				REASON FOR LEAVING:	
FULL NAME OF COMPANY:		(AREA CODE) TELEPHONE :_		SALARY	EMPLOYED
STREET ADDRESS:	CITY:	STATE:	ZIP:	BEGIN END	FROM TO
NAME & TITLE OF SUPERVISOR:	TITLE OF YO	UR POSITION:			inio/11(inio/11
LIST JOBS HELD, DUTIES PERFORMED, SKILLS USED, & PROMOTIONS WHILE EMPLOYED AT THIS COMPANY:				REASON FOR LEAVING:	
READ CAREFULLY: I certify that the in	ment or discharge. I authorize	the references listed above	e to give you any and all info	rmation concerning my p	revious employme
and any pertinent information they may have	e, personal or otherwise, and r	elease all parties from all lia	ibility for any damage that ma	y result from furnishing s	same to you.