



APPLICATION FOR EMPLOYMENT

Glick Fire Equipment Company exists to fulfill the need of providing exemplary services to its employees, surrounding customers, and vendors. Creating a successful and secure working environment for employees and their families is a prioritized goal. By placing teamwork as a top value, employees are able to depend on each other to extend reliable customer service to each customer or vendor. Each employee is a member of the Glick Fire Family and represents the company daily.

Glick Fire Equipment Co., Inc. is an equal opportunity employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state and federal law.

GENERAL DETAILS

Date: _____

Applicant Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Alternate Phone: _____

Text Messaging Yes No

Email: _____

Are you legally eligible to work in the United States?

Yes No

Are you currently employed?

Yes No

Do you hold a valid Commercial Driver's License (CDL)? Yes No

What endorsements are on your CDL? _____

If selected for employment, are you willing to submit to a background check? Yes No

How were you referred to Glick Fire for employment?

Indeed. Glick Fire Website. Current Employee. Friend. Other.

Name of person who referred you: _____

POSITION

Position you are applying for: _____ Location: _____

Available start date: _____ Desired pay: _____

Are you willing to travel as part of your job duties? _____

EDUCATION

HIGH SCHOOL OR GED

Name: _____

Number of years completed/credits completed: _____

Diploma/Degree/Certificate: _____

COLLEGE OR UNIVERSITY

Name: _____

Major/Minor: _____

Number of years completed/credits completed: _____

Diploma/Degree/Certificate: _____

VOCATIONAL OR TECHNICAL

Name: _____

Program: _____

Number of years completed/credits completed: _____

Diploma/Degree/Certificate: _____

U.S. MILITARY SERVICE OR TRAINING

Branch of Service: _____

Rank at time of separation: _____

Number of years served: _____

Special honors: _____

Special courses or training that will help you in the position you are applying for?

Special or technical skills or experience?

Please describe any special interests you have or volunteer work you do.

MECHANICS/TECHNICIANS ONLY

Do you have a PA State Inspection License – minimum Class 7? _____

Do you have an A/C Certification (CFC-12/HFC-134a)? _____



EMPLOYMENT HISTORY

Current Employer: _____

Address/Location: _____

Supervisor's Name: _____ Supervisor's Title: _____

Supervisor's Phone Number: _____

May we contact? Yes No

Last Position Held: _____ From: _____ To: _____

Current Salary: _____

Responsibilities: _____

Reason for leaving:

Previous Employer:

Address/Location:

Supervisor's Name:

Supervisor's Title:

Supervisor's Phone Number:

May we contact?

Yes No

Last Position Held:

From:

To:

Salary:

Responsibilities:

Reason for leaving:

Previous Employer:

Address/Location:

Supervisor's Name:

Supervisor's Title:

Supervisor's Phone Number:

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Yes No

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Salary: _____

Responsibilities: _____

Reason for leaving:

Previous Employer: _____

Address/Location: _____

Supervisor's Name: _____ Supervisor's Title: _____

Supervisor's Phone Number: _____

May we contact? Yes No

Last Position Held: _____ From: _____ To: _____

Salary: _____

Responsibilities: _____

Reason for leaving:



Disclaimer and Signature

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to re-quest and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment with- drawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

Signature: _____

Date: _____