



MAINE FIRE PROTECTION SYSTEMS

P.O. Box 1050
Bangor, ME 04402-1050
Tel: (207) 942-8809
Fax: (207) 941-1910

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, or physical or mental disability. We offer reasonable accommodation to qualified individuals with disabilities.

Date of Application _____ Position(s) Applied For _____

Name _____
LAST FIRST MIDDLE

Address _____
NUMBER STREET CITY STATE ZIP

Telephone(____)_____ Social Security Number____/____/____

Are you over age 18? ___Yes ___No If no can you furnish a work permit? ___Yes ___No

Have you filed an application here before? ___Yes ___No If yes, give date _____

Have you ever been employed here before? ___ Yes ___ No If yes, give date _____

Are you employed now? ___Yes ___No May we contact your present employer? ___Yes ___No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status?
___Yes ___No

(Proof of citizenship or immigration status will be required upon employment.)

On what date would you be available for work? _____

Are you available for work ___Full Time ___ Part Time Saturday ___Yes ___No Sunday ___Yes ___No

Are you on lay-off and subject to recall? ___Yes ___No

Can you travel and stay overnight if the job requires it? ___Yes ___No

Do you have a valid driver's license ___Yes ___No License # _____ State _____

- (a) Have you ever been convicted of a crime?
 Yes No (Conviction will not necessarily disqualify applicant from employment)
- (b) Have you ever had a civil court judgment entered against you (other than divorce) or against a business you owned? Yes No
- (c) Have you ever been denied unemployment due to misconduct? Yes No
- (d) Have you ever been involuntarily terminated, or asked to resign, from any job? Yes No

If you answered Yes to (a), (b), (c) or (d), please explain on the back of this page.

Are you a veteran of the U.S. Military? Yes No If yes, what branch? _____

List professional, trade, business, or civil activities, licenses or offices held.

(You may exclude memberships which would reveal sex, race, religion, national origin, age ancestry, disability, union affiliation or other protected status.)

Give name, address and telephone number of three references who are not related to you and not previous employers. (If references listed below would know you by another name, please indicate.)

Do you have any relatives (by blood or marriage) employed here? Yes No

If yes, name? _____ Relationship? _____

Do you have any experience in pipe fitting? Yes No

Specifically sprinkler systems? Yes No

Do you have any problems working with heights? Yes No

Starting with your present or, if you are currently unemployed, your last job, list all employers during the fifteen years or your last three employers, whichever period is longer. **Do not omit any employer or requested information within this period.** If past employers would know you by another name, please indicate. (If you need additional space, please continue on the back of this page.)

1. _____ (____) _____ From _____ To _____
 EMPLOYER TELEPHONE DATES EMPLOYED

 ADDRESS WORK PERFORMED

 SUPERVISOR'S NAME Starting _____ Final _____
 HOURLY RATE/SALARY

 YOUR JOB TITLE REASON FOR LEAVING

2. _____ (____) _____ From _____ To _____
 EMPLOYER TELEPHONE DATES EMPLOYED

 ADDRESS WORK PERFORMED

 SUPERVISOR'S NAME Starting _____ Final _____
 HOURLY RATE/SALARY

 YOUR JOB TITLE REASON FOR LEAVING

3. _____ (____) _____ From _____ To _____
 EMPLOYER TELEPHONE DATES EMPLOYED

 ADDRESS WORK PERFORMED

 SUPERVISOR'S NAME Starting _____ Final _____
 HOURLY RATE/SALARY

 YOUR JOB TITLE REASON FOR LEAVING

Indicate the highest year completed in High School. 1 2 3 4 College/University 1 2 3 4

Diploma or Degree earned _____

Describe course of study _____

HONORS RECEIVED: State any additional information you feel may be helpful to us in considering your application on the reverse side.

APPLICANT'S STATEMENT

I certify that all answers given herein are true and complete. I authorize investigation of all statements in this application. I authorize PD Industries, Inc. to contact prior employers and references I have given. I release such persons from liability to me for any opinions or information, to induce them to respond candidly to such inquiries.

This application for employment shall be considered active for a period of time no to exceed 14 days. Any applicant wishing to be considered for employment beyond that time period should inquire as to whether or not applications are being accepted at that time. Accepting applications does not necessarily mean that current openings exist. All offers of employment are conditioned on the satisfactory outcome of any required job-related medical examination and/or inquiry and upon the applicant being able to perform the essential function of the position with or without reasonable accommodation.

The applicant understands that neither this application nor any offer of employment from the employer constitute an employment contract unless a specific written document to that effect is executed by the employer and employee. The applicant understands that all employment at PD Industries, Inc. is terminable at will, with or without cause.

I understand that false or misleading information give, or omissions, in this form at any point in the application or interview process, may result in denial of or termination from employment. I also understand that I am required to abide by all rules and policies of the employer, which it may change in its sole discretion.

Signature of Applicant Date: _____