

1919 E. 52nd Street
Indianapolis, IN 46205
317-641-4673

(Please Print Clearly – complete all 6 pages)

Position(s) Applying for:

www.hopeplumbing.com

Application Date: ____/____/____

Personal Information

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: ____-____-____ Work Phone: ____-____-____ ext. ____ Cell Phone: ____-____-____

Email Address: (if available) _____

How did you hear about our company? _____

Employment Information

Citizenship/Work Status: U.S. Citizen Green Card Holder U.S. Work Permit/Visa Canadian Citizen Canadian Work Permit/Visa

Current Employer: (if any) _____

Years of Work Experience directly related to the position you are applying for: _____

Employment Type Desired: Full-Time Part-Time

Desired Compensation: \$ _____ Hourly Annual

Other Compensation Desired: _____

When are you available to start work? _____

Education

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	# OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College/University				
Bus. or Trade School				
Professional School				

Criminal History

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR (except any minor traffic violations)? No Yes

If yes, please explain and attach any relevant documentation. _____

Drivers License Information

DO YOU HAVE A VALID DRIVER'S LICENSE? Yes No

Do you have reliable transportation to work (please be specific)? _____

Driver's license number: _____ State of Issue: _____

Operator Commercial (CDL) Chauffeur Do you have a clean driving record? Yes No

List any Moving Violations and/or Accidents from the last 3 years: _____

Military Service

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No Branch: _____

ARE YOU CURRENTLY A MEMBER OF THE NATIONAL GUARD or RESERVES? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience

Please list your work experience for the past 5 years beginning with your most recent job.
 If you were self-employed, give firm name. Attach additional sheets if necessary. Attach Resume if applicable.

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From To	Start Final
Phone:	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From To	Start Final
Phone:	Your last job title		
Specific reason for leaving			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Certifications & Licenses

What Certifications & Licenses do you have? (Select all that apply)

- Apprentice Plumber License
- ASPE - CPD (Certified in Plumbing Design)
- IAMPO Certified Inspector
- ICC Commercial Plumbing Inspector
- ICC Plumbing Code Official
- ICC Plumbing Inspector
- ICC Plumbing Plans Examiner
- ICC Residential Plumbing Inspector
- Journeyman Plumber License
- Master Plumber License
- NSF Certification
- Registered Professional Engineer

Include State and License Numbers for any licenses selected above, if applicable: _____

Other Licenses & Certifications held: _____

Additional Information

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. If you have a resume, please include it with this application.

References

Please list three professional references:

Name: _____ Telephone Number: _____

Name: _____ Telephone Number: _____

Name: _____ Telephone Number: _____

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Hope Plumbing, LLC creates an actual or implied contract of employment. I understand that, if I accept employment with Hope Plumbing, LLC, it will be on an at-will basis. This means that either Hope Plumbing, LLC or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by Hope Plumbing, LLC. I release Hope Plumbing, LLC and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Hope Plumbing, LLC to investigate information concerning my education, licensing, certifications, driving record, criminal history, employment experiences and all other aspects of my background relevant to my proposed employment. I release Hope Plumbing, LLC and its employees from all liability arising from such.

Signature of Applicant: _____ **Date:** ____/____/____

Print Name: _____

Hope Plumbing, LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Hope Plumbing, LLC depends solely on your qualifications.