



Since 1938
CONDITIONED AIR, INC.

P.O. BOX 4023 • 241 SOUTH ST • MACON, GA 31208 • PH 478/742-8768 • FAX 478/742-5981

Conditioned Air, Inc. is an equal opportunity employer and does not discriminate on the basis of race, color, sex, gender, national origin, religion, age, disability, genetic information, and any other classification protected by applicable federal or state law.

Confidential Employment Application

Date: / /

Personal Information:

Name: Last First Middle Initial S.S. #: - -

Address: Street City State Zip

Phone Number: Type of Number: - - - - Email:

Employment Desired:

Position: Date You Can Start: / / Salary or Hourly Rate Desired:

Are You Employed Now? Y N If So, May We Inquire Of Your Present Employer? Y N - - If Yes, Employer Phone #

Who Referred You? Ever Applied To CAI Before? Y N When? / /

Education:

Table with 4 columns: Name And Location Of School, Check Years Completed, Did You Graduate?, Subjects Studied And Degree(s) Received. Rows for Grammar School, High School, College/University, Trade, Business, Or Correspondence School.

Other:

U.S. Military Service: Rank: Present Membership: National Guard Reserves Check One

Subjects Of Special Study, Research Work, Or Special Skills:

Blank lines for special skills.

Work Experience:

Employer (Start With Most Recent):	Dates (Mo/Yr):	Job Title:	Pay Rates:	Reason For Leaving:
Name:	From: /			
Address:	To: /			
Name:	From: /			
Address:	To: /			
Name:	From: /			
Address:	To: /			
Name:	From: /			
Address:	To: /			

References:

List three persons, not related to you, who have known you for at least a year.

1.	_____	_____	_____	_____
	Name	Business	Years Known / Relationship To Applicant	Contact Information
2.	_____	_____	_____	_____
	Name	Business	Years Known / Relationship To Applicant	Contact Information
3.	_____	_____	_____	_____
	Name	Business	Years Known / Relationship To Applicant	Contact Information

Inquiry As To Criminal Record:

Have you ever been arrested or charged with any crime (other than minor traffic offences where no accident occurred?)

 /
 Y / N

If your answer is yes, please give full details of each charge, conviction, plea, or other disposition including the date, the location, the court and the disposition of the matter.

Driving Record:

License #: _____ State: _____

Please list date and description of any traffic violations you have had in the last three years (five years for DUI):

Are you willing to submit to random drug testing? /
 Y / N

In Case Of Emergency Notify: _____
 Name Address Phone

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation on all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damages that may result from furnishing same to you."

"I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any prior notice"

"I agree that, if hired, my employer may require me to undergo testing for use of illegal drugs at any time and without further notice. I understand that I will be subject to discharge if I refuse."

This application becomes invalid after thirty days from date of application. If you wish to be considered for employment after this 30 day period, a new application must be completed.

Date: / /

Signature: _____