



FIRE TECH SYSTEMS, INC. Application for Employment

An Equal Opportunity Employer

NOTE: Applications must be completed by the applicant and no one else. Incomplete applications will not be considered. Completed applications are active for thirty (30) days. You must reapply after thirty (30) days.

PERSONAL INFORMATION

Date of Application: _____

Name _____
 Last First Middle Social Security Number

Address _____
 Street City State Zip

Phone _____ **Email** _____

Driver's License No. _____ **Expiration Date:** _____

Date of Birth _____ (required for background check)

EMPLOYMENT DESIRED

Position _____ **Salary Desired:** _____

Date You Can Start: _____

Have you ever been convicted of a crime/felony? No Yes **If so, please explain:**

Are You Currently Employed? No Yes

If so, may we contact your employer? No Yes

Have you applied to Fire Tech Systems before? No Yes
 If so, when? _____

FORMER EMPLOYERS

List last four employers, beginning with the most current

Begin Month/Yr	End Month/Year	Employer Name/Address	Position	Reason for Leaving

Have you ever been discharged or asked to resign?				
No Yes Describe: _____				

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EDUCATION

	Name and Location of School	Did You Graduate?
Grammar		
High		
College		
Trade		
Business		

Are You a Veteran? No Yes Service: _____
 Rank: _____

REFERENCES			
Three persons not related to you or living with you, whom you have known for at least one year.			
Name	Address	Phone	Years Known

I certify that the facts contained in this application are true and complete to the best of my knowledge, and that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of 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 damage 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.

Signature _____ Date _____

We are an equal opportunity employer. Federal law prohibits discrimination on the basis of age, race, color, national origin, religion or sex. Facts relating to your age, race, sex, religion, national origin or color are not considered in assessing your qualification for employment.

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NOTICE TO APPLICANTS

This Company does not require a pre-employment medical examination but does reserve the right to require drug testing and a medical examination after an offer of employment is made to an applicant. All offers of employment are conditioned upon the passing of a drug test for the purpose of detecting illegal use of drugs. Also, if an employment offer is made, you will be asked to answer certain medical questions. Medical examinations and answers to medical inquiries will be maintained on separate forms and will be treated as confidential medical records. An applicant will not be excluded from employment unless they have medical conditions that prohibit their ability to perform the essential job functions of the position he or she desires with this Company. The Company will make reasonable accommodations to aid handicapped applicants or employees fulfill essential job functions. Written job descriptions are available and will be furnished to applicants upon request.

REPRESENTATIONS AND WAIVERS

Read the following conditions. If you have any questions regarding the conditions, you should ask for an explanation or clarification from the employment interviewer. Signify your understanding and specific acceptance of each condition by your signature in the space provided at the end of the conditions.

I hereby authorize the Company to investigate any and all statements contained in this application. I hereby consent to the Company conducting any checks concerning my background which are deemed necessary, advisable, or helpful by the Company (except contacting my current employer, unless permission is granted above). I understand that if hired, I will receive a copy of the Company's rules and regulations and the Company's policies, including its drug policy. I will read and understand the rules, regulations and policies; and I acknowledge that I will be required to abide by them. I understand that, if hired, I will be required to submit to a drug test as part of this application procedure. I hereby consent to that drug test, agree to cooperate fully with that drug test, and waive any and all objections I might otherwise have to such drug testing. I understand that I may be required to submit to a medical examination if I am advised of a favorable employment decision. I hereby consent to such medical examination and will fully cooperate with any required examination. **I understand and agree that if this application results in employment, my employment can be terminated with or without cause and with or without notice, at any time, at the option of either the Company or myself.** I understand that no manager or representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing. I understand that due to the cyclical nature of the construction industry that the Company is not in a position to employ field personnel on a permanent basis.

I certify and guarantee that all statements made on this application are true and complete to the best of my knowledge and without mental reservations. I understand that falsification of this application

may result in my not being considered for employment or, in the event I become employed by the Company, in my dismissal.

Signature _____ Date _____

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