



We Sell the Best & Service the Rest

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, national origin, marital status, or the presence of non-job related medical condition or handicap.

| | | | | | | | | | | | |
|---|--|--|--|------------------------|--|---|--|-----------|------------------------|---------------------|--|
| Last Name | | | | First | | Middle | | Maiden | | Date of Application | |
| Street Address | | | | | | | | | Home Telephone | | |
| City, State, Zip Code | | | | | | | | | Cell Phone | | |
| Social Security Number | | | | | | Email Address | | | | | |
| Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | Alternate Email Address | | | | | |
| EMPLOYMENT DESIRED | | | | | | | | | | | |
| Position Desired | | | | | | Date Available | | | Wage or Salary Desired | | |
| What range of hours are you willing to work weekly? Are you willing to be on call? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you work nights? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you willing to work out of town? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | Hours Available | | From | | To | | | |
| | | | | Monday | | | | | | | |
| | | | | Tuesday | | | | | | | |
| | | | | Wednesday | | | | | | | |
| | | | | Thursday | | | | | | | |
| | | | | Friday | | | | | | | |
| | | | | Saturday | | | | | | | |
| | | | | Sunday | | | | | | | |
| Type of Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary | | | | | | Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No Proof of U.S. citizenship or immigration status will be required upon employment. | | | | | |
| Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | If so may we enquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | |



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| EDUCATION | | | | | | |
|-------------------------------|-----------------------------|--|-------------|------------------|-------------|----------------|
| Level | Name and Location of School | Diploma or Degree (Credits Earned if No Degree) | Overall GPA | Attendance Dates | | Majors/ Minors |
| | | | | From Mo/Yr | To Mo/Yr | |
| High School | | | | | | |
| Business, Trade, or Technical | | | | | | |
| College | | | | | | |
| Graduate School | | | | | | |
| Other | | | | | | |

If degrees were received under a name other than that listed on this application, please provide your full name at the time the degree was awarded:

Degree: _____ Name At Time Earned: _____

Scholastic Achievements:

MILITARY HISTORY

Have you ever been in the armed forces? ☐ Yes ☐ No

Were you honorably discharged? ☐ Yes ☐ No

Are you now a member of the National Guard? ☐ Yes ☐ No

Specialty_ _____ Date Entered_ _____ Discharge Date_ _____

SKILLS AND QUALIFICATIONS

Summarize specific skills and qualifications acquired from employment or other experiences that are related to the position for which you are applying (e.g., computer skills, software applications, and foreign languages):



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| EMPLOYMENT HISTORY | | | | |
|--|--|--------------------|----------|--|
| Please provide a COMPLETE employment history, even if a resume is submitted with this application. List ALL employers, assignments, or volunteer activities, starting with the most recent, including military employment. Explain any gaps in employment in the "Comments" section below. Please use the "Employment History Continuation Sheet" if additional space is needed. | | | | |
| (1) Present/Most Recent Employer Telephone | | Dates Employed | | Summarize the nature of the work performed and job responsibilities. |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving or why you are considering leaving? | | \$ | per | |
| (2) Next Previous Employer Telephone | | Dates Employed | | |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving? | | \$ | per | |
| (3) Next Previous Employer Telephone | | Dates Employed | | Summarize the nature of the work performed and job responsibilities. |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving? | | \$ | per | |



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| | | | | |
|---|--|--------------------|----------|--|
| (4) Next Previous Employer Telephone | | Dates Employed | | Summarize the nature of the work performed and job responsibilities. |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving? | | \$ | per | |
| (5) Next Previous Employer Telephone | | Dates Employed | | |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving? | | \$ | per | |
| (6) Next Previous Employer Telephone | | Dates Employed | | Summarize the nature of the work performed and job responsibilities. |
| | | From Mo/Yr | To Mo/Yr | |
| Address | | | | |
| Job Title | | Hourly Rate/Salary | | |
| | | Starting | | |
| Immediate Supervisor and Title | | \$ | per | |
| Type of Employment <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Hourly Rate/Salary | | |
| | | Final | | |
| Reason for leaving? | | \$ | per | |



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COMMENTS (including explanation of any gaps in employment):

REFERENCES

List three business/work references who are **NOT** related to you and are **NOT** previous supervisors, but whom you have known at least one year. If not applicable, list three school or personal references that are not related to you.

| Name | Telephone | Years Known | In what capacity did this person observe you or your work? |
|------|-----------|-------------|--|
| | | | |
| | | | |
| | | | |

PROFESSIONAL LICENSES

List any professional license(s) and list state(s) in which licensed:

MEMBERSHIPS

List professional, trade, business, or civic associations (exclude memberships which would reveal sex, race, religion, national origin, age, color, or disability).

| Organization | Offices Held | Dates | |
|--------------|--------------|--------------|------------|
| | | From (mo/yr) | To (mo/yr) |
| | | | |
| | | | |
| | | | |

SPECIAL ACCOMPLISHMENTS, PUBLICATIONS, AND AWARDS



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| DRIVING HISTORY | | | | |
|------------------|-------|-------------|------|-----------------|
| DRIVER LICENSE'S | STATE | LICENSE NO. | TYPE | EXPIRATION DATE |
| | | | | |
| | | | | |
| | | | | |

| DRIVING EXPERIENCE | | | |
|------------------------|--|------------------|---------------------------------|
| CLASS OF EQUIPMENT | TYPE OF EQUIPMENT (VAN, TANK, FLAT, ETC.) | DATES FROM TO | APPROX. NO. OF MILES (TOTAL) |
| STRAIGHT TRUCK | | | |
| TRACTOR & SEMI-TRAILER | | | |
| TRACTOR-TWO TRAILERS | | | |
| OTHER | | | |

| ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED) | | | |
|---|--|------------|----------|
| DATES | NATURE OF ACCIDENT (HEAD-ON, REAR-END, UPSET, ETC.) | FATALITIES | INJURIES |
| | | | |
| | | | |
| | | | |
| | | | |

| TRAFFIC CONVICTIONS & FOREITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS) | | | |
|---|------|--------|---------|
| LOCATION | DATE | CHARGE | PENALTY |
| | | | |
| | | | |
| | | | |

A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? ☐ Yes ☐ No

B. Has any license, permit, or privilege ever been suspended or revoked? ☐ Yes ☐ No

IF THE ANSWER TO EITHER **A** OR **B** IS YES. ATTACH STATEMENT GIVING DETAILS

| OTHER INFORMATION |
|---|
| Have you ever been convicted of, or are you now under charges for, any misdemeanor or felony offense? Omit (1) traffic speeding fines. (A yes response will not necessarily disqualify you from employment.) <input type="checkbox"/> Yes <input type="checkbox"/> No If checked yes, please explain below. |
| Are you bound by any non-solicitation/non-compete agreement? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you ever applied here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If so: When? _____ Position? _____ |
| What prompted your application to Mather & Sons Pump Service, Inc.? Ad _____ Friend _____ (Please indicate name of ad(s)/friend) Current Employee _____ Other _____ |



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EMERGENCY CONTACT INFORMATION

1. Name_____ Relationship_____

Home Phone_____ Work Phone_____

Address_____

2. Name_____ Relationship_____

Home Phone_____ Work Phone_____

Address_____

3. Name_____ Relationship_____

Home Phone_____ Work Phone_____

Address_____



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INVESTIGATION AUTHORIZATION

By signing below, I hereby authorize Mather & Sons Pump Service, Inc. to conduct an investigative report and/or reference check concerning all statements contained in my application for employment; to interview all employers, references, and other individuals and institutions to obtain information and opinions about me; and to conduct any other investigation that it deems appropriate. Such investigation may include but is not limited to my education, employment history (except my current employer if I have so indicated above), character, general reputation, credit history, and driving, court, law enforcement, and military records. In the event that I am employed by Mather & Sons Pump Service, Inc., I hereby authorize Mather & Sons Pump Service, Inc. to answer any inquires regarding my employment, conduct, qualifications, and reasons for leaving.

This release is executed with my full knowledge and understanding. In exchange for being considered for employment, I hereby release Mather & Sons Pump Service, Inc., its directors, officers, employees, and agents, as well as any law enforcement agency, current or former employer, educational institution, credit agency, , its representatives and any third party persons, or any other individual providing information about me to Mather & Sons Pump Service, Inc., from any and all liability for damages of whatever kind, which may at any time result to myself, my heirs, family, or associates because of compliance with this authorization or any attempt to comply with it.

Further, should I become employed by Mather & Sons Pump Service, Inc. I authorize Mather & Sons Pump Service, Inc. to obtain this information once each year, and/or at the time the company is considering promoting me in its employment, to verify that I have not committed any offenses that would make me ineligible for continued employment.

I hereby direct release of such information, upon request, to Mather & Sons Pump Service, Inc.

Should there be any question as to the validity of this release, I may be contacted as indicated below.

Print Name: _____

Signed: _____

Date: _____

Telephone: _____

2nd Telephone: _____

Social Security Number: _____

Date of Birth: _____

Witness (Print Name): _____

Witness Signature: _____



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PLEASE REVIEW APPLICATION CAREFULLY. WE WILL NOT CONSIDER THIS APPLICATION IF NOT COMPLETED IN FULL.

PLEASE READ THE FOLLOWING AND SIGN THE APPLICATION IN THE SPACES PROVIDED BELOW. IF YOU HAVE ANY QUESTIONS, PLEASE SPEAK WITH THE HUMAN RESOURCES REPRESENTATIVE BEFORE SIGNING.

I understand that employment by Mather & Sons Pump Service, Inc. is “at will.” This means that the employment relationship can be ended by me or by Mather & Sons Pump Service, Inc. at any time for any reason with or without advanced notice and with or without cause. It also means that Mather & Sons Pump Service, Inc. may revise and make exceptions to its policies, practices, handbooks, manuals, rules, procedures, and regulations, in whole or in part, at any time. I further understand that acceptance of an offer of employment does not create a contractual obligation upon Mather & Sons Pump Service, Inc. to continue to employ me in the future or for any specific term. Notwithstanding the above, I understand that no representative of Mather & Sons Pump Service, Inc., except the president, has any authority to enter into any agreement of employment for a definite term. Any such agreement must be in writing and signed by the president.

If employed by Mather & Sons Pump Service, Inc., I agree to comply with all safety and health rules, company policies and procedures, and local, state, and federal laws pertaining to my employment. Although management makes every effort to accommodate individual preferences, organizational needs may make the following conditions mandatory: overtime, or a work schedule other than Monday through Friday or normal business hours. I understand and accept these as conditions of my employment should I be hired.

I have reviewed this application carefully and I hereby affirm that my statements and answers to all questions on this application are true and correct and that I have not knowingly withheld any fact or circumstance that, if disclosed, would affect my application unfavorably. I understand that any misstatement or omission of fact on this application may result in my application not being considered, and, if employed, may result in my immediate dismissal.

I HAVE READ AND AGREE TO THE ABOVE TERMS AND CONDITIONS:

Print Name: _____

Signature of Applicant: _____

Date: _____



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EMPLOYMENT HISTORY CONTINUATION SHEET

| | | | | | |
|---|--|--------------------|-----|--|-------------|
| Last Name | | First | MI | Date of Application | |
| Please place a number in the upper left-hand parentheses to designate the next previous employer, as continued from page 3 of the Employment Application, if this is your first continuation sheet, then number is 5. | | | | | |
| () Next Previous Employer | | Telephone | | Dates Employed | |
| | | | | From Mo/Yr | To Mo/Yr |
| Address | | | | Summarize the nature of the work performed and job responsibilities. | |
| Job Title | | Hourly Rate/Salary | | | |
| | | Starting | | | |
| Immediate Supervisor and Title | | \$ | per | | |
| Type of Employment | | Hourly Rate/Salary | | | |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Final | | | |
| Reason for leaving? | | \$ | per | | |
| () Next Previous Employer | | Telephone | | Dates Employed | |
| | | | | From Mo/Yr | To Mo/Yr |
| Address | | | | Summarize the nature of the work performed and job responsibilities. | |
| Job Title | | Hourly Rate/Salary | | | |
| | | Starting | | | |
| Immediate Supervisor and Title | | \$ | per | | |
| Type of Employment | | Hourly Rate/Salary | | | |
| <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Other | | Final | | | |
| Reason for leaving? | | \$ | per | | |