

Stilian Electric, Inc.
 108 Tenney Street
 Georgetown, MA 01833-1823
 Phone (978) 352-9994
 Fax (978) 352-9998

EMPLOYMENT APPLICATION

An equal opportunity employer.

PERSONAL

Name _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip Code)

Telephone _____ Social Security Number _____
(Area Code) (Area Code)

Cell phone _____ E-Mail _____
(Area Code)

Driver's License # _____ State _____ Date of Birth _____

Have you ever been convicted of a felony? Yes No Explain Felony _____

Are you a citizen of the United States? Yes No _____

JOB INTERESTS/SKILLS

Position(s) applied for _____ Salary Desired _____

Have you applied for a position here before? Yes No If yes, when? _____

Type of employment requested Full Time Part Time Temporary Summer

Date you could begin working _____

Are you willing to travel if necessary? 30 Minutes 45 Minutes 60 Minutes Overnight

Summarize any other special skills or qualifications

EDUCATION

| TYPE OF SCHOOL | NAME AND LOCATION | COURSE OF STUDY | # OF YEARS | GRADE AVERAGE | MAXIMUM GRADE | DEGREE, DIPLOMA, CERTIFICATE AND HONORS RECEIVED |
|-----------------------|-------------------|-----------------|------------|---------------|---------------|--|
| HIGH SCHOOL | | | | | | |
| COLLEGE OR UNIVERSITY | | | | | | |
| OTHER EDUCATION | | | | | | |

EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

1. Name of Employer _____
Address _____
(Street) (City) (State) (Zip Code)
Supervisor and Title _____ Your Title _____
Employed From _____ To _____ Starting Salary _____ Ending Salary _____
Work Performed _____
Reason for leaving _____

2. Name of Employer _____
Address _____
(Street) (City) (State) (Zip Code)
Supervisor and Title _____ Your Title _____
Employed From _____ To _____ Starting Salary _____ Ending Salary _____
Work Performed _____
Reason for leaving _____

3. Name of Employer _____
Address _____
(Street) (City) (State) (Zip Code)
Supervisor and Title _____ Your Title _____
Employed From _____ To _____ Starting Salary _____ Ending Salary _____
Work Performed _____
Reason for leaving _____

REFERENCES

| Name | Relationship | Home Phone | Daytime Phone |
|------|--------------|------------|---------------|
| | | | |
| | | | |
| | | | |

ACKNOWLEDGEMENT

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. Verification of eligibility to work in the United States must be satisfied for an offer to be made. **I further understand that Stilian Electric, Inc. conducts random drug and alcohol tests and that I may be required to submit to a test prior to employment as well as any time during my employment and agree to perform such tests if asked to do so.**

Applicant's Signature _____ Date _____