

JOB APPLICATION

KLOOS ELECTRIC LLC.

Watertown, SD 605.881.5859

Kloos Electric is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

Name (Last, First)				Social Security #			Date of Birth
Present Address		City			ST	Zip Code	
Permanent Address		City			ST	Zip	Code
Phone Number			Referred by				
L							
Position				Desired Start Date	Desire	ired Salary	
Are you currently employed: Yes / No				Are you legally authorized to work in the U.S.A Yes / No /			
Are you able or interested in overtime?				Have you ever been convicted of a crime? Yes □ / No □			
Explanation of crime (if extra	a spa	ce is need	please	attach furthei	r documer	itatio	n)
(Note: No applicant will be denied emplo the offense, including any significant deta the offense to the position(s) applied for	ails tha	t affect the d	escription				
Do you have any condition in If yes, please describe accomr					lations?	Yes [□ No □

Job Skills/ Qualifications Please list below the skills and qu	ualificatio	ns you pos	sess for the	position fo	or which you are applying:	
(Note: Kloos Electric complies with the ADA a applicants/employees to perform essential for examination conducted by a medical profess Education and Training	unctions. It is					
High School Name	Location (City	y, State)	Year Graduated		Degree Earned	
College/ University Name	Location (City	y, State	Year Graduated		Degree Earned	
Vocational School/ Specialized Training Name	Location (City, State)		Year Graduated		Degree Earned	
Military:						
Are you a member of the Armed					_	
What is your current rank?						
How many years have you serve				_		
What military skills do you posse	ess that wo	ould be an	asset for th	is position?	?	
Previous Employment:						
Employer Name:				Job Title: Supervisor Name:		
Employer Address:		City, State, an		and Zip Code		
Employer Telephone:	Dates Emp	Dates Employed:				
		,				
Reason for leaving:						
Employer Name:	Job Title:		Supervisor Name:			
Employer Address:	<u> </u>	City, State, and		l 7in Code		
Employer Address.			City, State, and	Zip Code		
Employer Telephone:	Dates Emp	ploved:				
		,				
Reason for leaving:						
neason for leaving.						
Employer Name:	Job Title:		Supervisor Name:			

Employer Address:		City, State, and Zip Code				
Employer Telephone:	Dates Employed:					
Reason for leaving:						
References:						
Please provide 2 personal and	d professional referenc	ce(s) below:				
Name (First, Last)	Relation:		Telephone#:			
Name (First, Last)	Relation:		Telephone#:			
AT-WILL EMPLOYMENT						
 Γhe relationship between you	and Kloos Electric is r	eferred to as emplo	oyment at will. This means that			
• •	•	•	or without cause, with or without			
notice, by you or Kloos Electri	•					
agreement contrary to the fo		•	•			
employment is "at will," and t	,					
representations regarding you	ur employment can alt	er your at-will emp	oloyment status, except for a			
written statement signed by y	ou and the owner of k	Cloos Electric.				
						
Applicant Signature		Date				
For Office use only:						
Date Received:	Date Reviewed	1.	Hire Date:			
Date neceives.	Dute nevies		Tille Date.			
Received Copy of: DL S	SS Card W-2	Electrical License				