

## Application for Employment

Applying to (Check One):			
□ abj Fire Protection Co.			
☐ Billone Mechanical Contract	ors		
☐ Woodcock and Armani Plum	bing & Mechanical Contr	actors	
NSTRUCTIONS	-		
Each question should be fully and accurately answered	. Please answer all questions as fully as	possible.	
PLEASE PRINT CLEARLY, except for your signature. If application process, you are entitled to receive reasonate to be a negative factor in your application. This will no	ble accommodation to assist you. The re		
Foday's Date:			
PERSONAL DATA			
ast Name:	First Name:		Middle Initial:
Home Street Address:			
Home Street Address:	City	State	Zip
E-Mail:			
Telephone No.:	Social Security No.:		
Position Desired:			
Experience with Trade Equipment:			
Da vay have an OCLIA CardOlf as misses	bring that to vour orientation		Yes No
Do you have an OSHA Card? If so, please l DSHA Date of Certification:	•	' <u> </u>	
f you currently hold other certifications, plea	ase bring those cards to oriental	tion.	

## An Equal Opportunity Employer

Comfort Systems USA, Inc., together with its subsidiaries, is an equal opportunity employer in all aspects of employment and prohibits discrimination and harassment of any type to all individuals regardless of race, color, religion, sex, sexual orientation, national origin, age, disability, veteran status, genetic information, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training. We strive to foster a work environment that includes and embraces racial, ethnic and gender diversity and other individual differences. Our commitment to diversity and inclusion helps us attract and retain the best talent, enables employees to realize their full potential, and drives high performance through innovation and collaboration.

APPLICANT INFORMATION			
		Yes	No
Are you at least 18 years old?			
Are you legally allowed to work in the US?			
Have you ever applied for employment with us before?			
If yes, when:			
Have you ever been employed with us before?			
If yes, when:			
Are you employed now?			1
May we contact your present employer?			
Are you currently on "layoff status" and subject to recall?			
Are you currently enrolled in a NYS Certified Apprentice	Program?		
For employment verification, have you ever worked under	er a different name(s)?		1
If yes, list other name(s):			
Have you ever been convicted of a felony?			
If "yes", please explain:			
		Yes	No
Work Availability:		163	T
Full Time			
Part Time			
Weekends			
Holidays			
Overtime (weekdays)			+
Out of Town (100 miles or more)			
		Yes	No
Have you ever served in the United States Armed Force			<u> </u>
Date Entered: Military Branch:	Date Discharged: Military Occupation:		
williary Dianoli.	williary Occupation.		

MI

Social Security #:

## **EDUCATION**

	Name of School	Years Attended	Did You G Yes	Did You Graduate? Yes No	
High School					
College/University					
Trade School/Vocational					



Name: \_\_\_\_\_ Last

First

Name:	First	Social Sec	urity #:		
Last	First	MI			
EMP	LOYMENT H	ISTORY and PERSONAL I	REFERENCES		
May we contact your Please list your previ		er? Yes □ No □ Start with the present or most re	cent.		
Company Name: Position:					
Address:		Employed From (month/	year): to		
City:		Supervisor's Name:			
Telephone #:		Description of Duties:			
Reason For Leaving:					
Eligible for Rehire:   Ye	s 🗖 No				
Company Name:		Position:	Position:		
Address:		Employed From (month/	Employed From (month/year): to		
City:		Supervisor's Name:	Supervisor's Name:		
Telephone #:		Description of Duties:	Description of Duties:		
Reason For Leaving:					
Eligible for Rehire:   Ye	s 🗖 No				
	be conducted lega	ally in an ethical manner an all infor ole who are not family who can spe			
Name		Contact Number	Friend or Work		
Comments:					
Name		Contact Number	Friend or Work		
Comments:		<u> </u>			



Last	First	MI		
CONSENT TO JOB	CANDIDA	TE DRUG TESTING	•	
Comfort Systems USA (Syracu personnel, the testing laborato	ise), Inc. (the Co ry, the Medical R	mpany). I further authorize the leview Officer (if necessary). I	and/or alcohol and authorize release of any test re Company to discuss the results with the collect further release the personnel who have tested nords, and data concerning my test(s) to the app	ion site ne from
	ive resulted in a p	positive test. Only then will the	v proof of any medications to the Medical Review screen be confirmed as positive or negative. If pohis time."	
"I hereby consent to the admini	stration of the dru	ig test and to the terms and cor	nditions of the Consent Agreement."	
Job Candidate's Signature	):		Date:	_
Witness's Signature:			Date:	_
"I hereby refuse to consent to t withdrawing my employment ap			rstand by refusing to submit to drug/alcohol testin	g, I am
Job Candidate's Signature	):		Date:	_
Witness's Signature:			Date:	_
JOB APPLICANT'S	AGREEM	ENT AND CERTIFIC	CATION	
information given is four employment or discharge I authorize the past emplo	nd to be fals . I authorize th oyers, all refero utation, and pr	e in any way, it shall to be use of any information ences, and any other pers evious employment recor	s true in all respects, and I agree that be considered sufficient cause for der in this application to verify my statement sons to answer all questions asked conc rd. I release all such persons from any li	nial of s, and erning
"I understand that nothing intended to create an employment, including the Company as it deems	ng contained ployment contoloyment or for understand the gagent or in g duties, hours necessary. If aployment acc	in this employment appl ract between <b>Comfort Sy</b> the providing of any ben at no such promise or gu writing. I also understand s, working area, and days an employment relations	lication or in the granting of an intervystems USA (Syracuse), Inc. (the Comefit. No promises regarding employment arantee is binding upon the Company, of that if employed, the terms and condition of work may be changed from time-to-time is established, I understand that I har ny employment contract signed and the	npany) t have unless ons of me by ve the
Comprehensive Pre-Em affect my ability to take that a reasonable accortesting sites, modified right to require medical	nployment Po the test, I wi mmodation c testing cond documentation	ost-Offer Assessment**. Il so inform the Compar an be made. Requested itions, and accessible on concerning the need	CSUSA(Syr), I may be requested to to the line the event I have a disability that it prior to the administration of the to accommodations may include acceptesting forms. The Company reserve for the accommodation."	at will est so ssible es the
"I understand that if empl the employer may revise			ed are not conditions of employment an art, at any time."	d that

"I understand that this application will be kept on active file for six months from the date completed, after which

time I would have to reapply in accordance with established company procedures."

Social Security #:



Name: \_\_

Name:	t	First	MI	Social Security #:
**COMF	PREHENSIVE	PRE-EMPLO	YMENT POST	-OFFER ASSESSMENT
Employme develops	ent Post-Offer as and offers emplo	sessments. WorkS yment testing that	STEPS is a nationa	EPS to administer its Comprehensive Pre- illy-renowned employment testing provider that and objective. The purpose of the assessment ions of the job.
	a Comprehen			SUSA(Syr), is that you must schedule and assessment that finds you capable of
What wil	l happen at my	Comprehensiv	e Pre-Employme	ent Post-Offer Assessment?
licensed promitoring	ohysician or phy your ability to p	rsical therapist (Ferform the essenti	PT). The PT will a	a job simulation under the supervision of a administer and oversee your job simulation, position. The results of your test will be sent to cocessing.
How an applicant is scheduled for the Comprehensive Pre-Employment Post-Offer Assessment				
service fie	eld position, you		and participate in	working at CSUSA(Syr) in a construction or a Comprehensive Pre-Employment Post-Offer
Here's how	w you schedule y	our Comprehensiv	e Pre-Employment	Post-Offer assessment:
	Your hiring man	ager will notify Wo	orkSTEPS of your c	onditional offer of employment.
		•	contact you to dete earest WorkSTEPS	ermine your availability and schedule your facility.
	representative v	vill set up an app		nd times you provide will not work. The e and time as close as possible to your process.
			will provide you w what to wear, wha	ith all the information you need for your to bring, etc.
	be found capab ystems USA (Syı		the job before you	are officially hired and can begin working at
ACKNOW	LEDGEMENT:			
Signature	of Applicant:			Date:
	LETED			





