

## **APPLICATION FOR EMPLOYMENT - HVAC**

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws. Name\_\_\_ \_\_\_\_\_Position Applied For\_\_\_\_\_ \_\_\_\_\_Alternate or Cell Number Present Address\_\_\_\_\_ How Long have you lived here? \_\_\_\_\_ Previous Address\_\_\_\_\_ How Long have you lived there?\_\_\_\_\_ Desired Salary/Hourly Rate\_\_\_\_\_\_ Social Security #\_\_\_\_\_ If you were hired who is someone we can list as an Emergency Contact for you? Name: \_\_\_\_\_Contact # for them: If under the age of 18, can you produce the necessary work certificate at the time of employment? Yes  $\square$  No  $\square$ Type of employment desired? Full-time 

Part-time (Specify Hours) Are you willing to work overtime? Yes 

No 

Date you can start if hired\_\_\_\_\_\_\_ Have you previously applied for employment with this company? Yes □ No □ If yes, when? \_\_\_\_\_ Have you ever been employed by this company? Yes □ No □ If yes, provide dates and reason for separation \_\_\_\_\_\_ All applicants: Do not include convictions that were sealed, eradicated, erased, annulled by a court, or expunged, or convictions that resulted in referral to a diversion program: Have you ever plead guilty or no contest to, or been convicted of any criminal offense? Yes  $\square$  No  $\square$ CRIMINAL OFFENSES ONLY: If you answered yes, please explain and provide the dates Criminal convictions or arrests will not automatically disqualify an applicant from this job. We will consider the nature of the crime, its seriousness, whether the convictions(s) substantially related to the positions, functions, and qualifications, the frequency of the convictions, the applicant's age at the time of the conviction, the time elapsed since the date of the conviction or completion of jail sentence, the applicant's entire work and educational history, and employment referenced and recommendations. Have you ever initiated an act of violence in the workplace? Yes  $\ \square$  No  $\ \square$ 

If yes, please provide the date(s) and explain \_\_\_\_\_\_

Name of Previous Employer  May we contact your Prework EXPERIENCE CONTACT	Position	How Long did you work here? Start: End: Start: End: Start:	Phone	What was or Salary?	your final PayScale and
Employer  Way we contact your Pre		you work here? Start: End: Start: End: Start:	Phone		· •
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NORK EXPERIENCE CON	vious Employers	:: Yes □ No □			
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riease explain rully all gap	os in your empic	lyment history more tr	ian one montin_		<del></del>
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Have you ever been term	inated or asked	to resign from any job	? Yes □ No □		
Has your employment ev	er been termina	ted by mutual agreem	ent? Yes □ No		
lave you ever been giver					
f you answered yes to ar	y of these tree o	questions, please expla	ain the circumst	ances of each oc	casion:
				Continued to the content of the cont	
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REFERENCES: Please list t experience may list schoo	-		eferences we m	ay contact. Indivi	iduals with no prior wo
	i di volunteel le				
Name	Position	Company	Work	: Relationship	Phone
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Please list the names of p	ersonal referenc	ses (not previous emplo	oyers or relative	s) who know you	well that we may
contact.	0	Address	Phon	e	
Name	Occupation		1		# of Years Known



I understand that neither this application, nor any communication by a management representative, is intended to create or does create a contract of employment, offer, or promise of employment for a definite term. I acknowledge that if hired, employment is on an at-will basis in accordance with state law. This means ZAP is free to terminate my employment at any time, with or without cause or advance notice. I agree to conform to the rules and regulations of ZAP, and I understand that the company has complete discretion to modify such rules and regulations at any time.

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by GA state law.

I understand that ZAP is a drug-free workplace. I understand that pre-employment (post offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to random drug testing and or post-accident drug/alcohol testing to comply with ZAP policies.

If employed by ZAP, I understand and agree that the company, to the extent permitted by law, may require me to sign confidentiality, non-compete, and/or conflict of interest statement.

I certify that all information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any false information or omitted information may result in disqualification from consideration for employment or if employed, disciplinary action or dismissal may occur.

I authorize and consent to any party or agency contacted by this employer to furnish the abovementioned information. I hereby release, discharge, and hold harmless, to the extent permitted by law, any party delivering information to the Company or its authorized representative pursuant to this authorization from any liabilities, claims, charges, or causes of action which I may have because of the disclosure of the above requested information.

If hired, I understand that I will be required to provide a genuine documentation establishing my identity and eligibility to be legally employed in the United States by ZAP. I also understand that this Company employs only individuals who are legally eligible to work in the US.

I authorize a criminal background check and motor vehicle history to be run on myself to be considered for employment.

Applicant Signature	Date

At ZAP, we want to hire only the best. Please answer the following questions and fill out the application. We will use the above information to run a Background Check, Driving Record Verification, and Credit History Report, so make sure and complete the boxes above.					
1.	Have you ever been arrested? If so, what for and when? List each occurrence:				
2.	Have you ever been convicted of a felony? If so, for what reason and when was the conviction? List each occurrence:				
3.	Have you ever been in a car wreck? If so, was it legally your fault? When did it happen? List each occurrence:				
4.	Can you lift 60 lbs.? Yes □ No □				
5.	Can you lift 100 lbs.? Yes □ No □				
6.	Have you ever declared Bankruptcy? If so, when and why? List each occurrence:				
7.	Have you ever filed a Worker's Comp. Claim? If so, explain and include when each occurrence happened:				
8.	Have you ever sued anyone? If so, when and why? List each occurrence:				

Signature\_\_\_\_\_ Date\_\_\_\_



1. Tor F	The capillary tube is not a metering device.
2. TorF	On a three-phase motor, when you switch any leads on the line voltage, it will reverse the rotation.
3. TorF	When charging a manifold, the hand wheels are cracked, and the side hose is open to the center hose.
4. Tor F	Capacitance is measured in farads and microfarads.
5. Tor F	A typical residential thermostat has 4 wires.
6. TorF	In overcharged systems, suction and discharge are higher than normal and wattage is high.
7. TorF	A new filter dryer should never be installed in a unit that did not originally have one.
8. TorF	Vapor is always charged into the high side of the system to prevent slugging of the compressor.
9. TorF	With split system air conditioning equipment, the evaporator coil and the condensing unit are in the furnace system.
10. T or F	Liquid lines are larger than hot gas or suction lines.
11. T or F	In a chilled water system, water leaving the evaporator goes to the cooling tower.

## DISCLOSURE OF ZAP Cooling and Heating., TO OBTAIN A CONSUMER REPORT OR AN INVESTIGATIVE CONSUMER REPORT

In compliance with the Fair Credit Reporting Act, ZAP Cooling and Heating, notifies you that for employment purposes we may request a consumer report or an investigative consumer report in connection with your application for employment or employment. This report from a consumer reporting agency may include information bearing on your character, general reputation, personal characteristics or criminal background or mode of living.

## CERTIFICATION OF RECEIPT OF DISCLOSURE AND AUTHORIZATION TO OBTAIN A CONSUMER REPORT OR AN INVESTIGATIVE CONSUMER REPORT

I acknowledge that I have received a copy of the "Disclosure of ZAP Cooling and Heating's Intent to Obtain a Consumer Report, Criminal Report or Investigative Consumer Report" and a copy of "A Summary of Your Rights Under the Fair Credit Reporting Act.

I understand that the nature and scope of the investigative consumer report ZAP Cooling and Heating, requests includes information regarding my character, general reputation, personal characteristics, and mode of living. This report will include information on any criminal record. This information may be gathered through personal interviews with my prior employers, government agencies, courts, law enforcement agencies, department of motor vehicles, neighbors, friends, associates, others with whom I may be acquainted, or other persons who may have knowledge concerning any such items of information.

The interviews, if any are conducted, normally will be with only one person at each organization or entity that is contacted for an interview. The questions asked will relate to the information that would be expected to be within the possession of the person or organization being contacted. For example, government agencies, law enforcement agencies, courts and the department of motor vehicles will be asked about criminal records and driving records.

I understand that I may request a copy of this investigative consumer report upon its completion directly from the Human Resources Department of my employer I understand that I have a right to dispute with the consumer reporting agency any inaccureate information by directly contacting the agency once I have obtained the report from Human Resources.

I voluntarily authorize ZAP Cooling and Heating, to obtain a consumer report or an investigative consumer report regarding me in connection with my application for employment or my employment. I can revoke this authorization only in writing and the revocation will be effective only when ZAP Cooling and Heating, actually receives it.

Signature	Date
Print Name	Maiden Name / Other Name(s) Used
Social Security Number	Date of Birth*
Home Address (Street, City, State, Zip)	Driver License Number / Issuing State
Home Phone / Cell Phone	Email Address
Race / Sex	Professional Certifications

\*Date of birth, race and sex information will be used by the reporting agency to try to insure an accurate investigation. It will not be used in any employment decision. The Age Discrimination in Employment Act prohibits discrimination against person 40 years of age or older.