



# The PowerCore Group

AN EQUAL OPPORTUNITY EMPLOYER

PAH Constructors, Inc.  
PowerCore Construction, Inc.  
PowerCore Communications, Inc.  
PowerCore of Florida, Inc.

Application for Employment

DATE: \_\_\_\_\_

## PERSONAL INFORMATION:

NAME (LAST NAME FIRST)		POSITION APPLIED FOR:		
PRESENT ADDRESS		CITY	STATE	ZIP CODE
PERMANENT ADDRESS		CITY	STATE	ZIP CODE
HOME PHONE NO. ( ) ( )	CELL NO. ( ) ( )	REFERRED BY:		
DRIVER'S LICENSE NO.		STATE ISSUED	CDL CLASS ____ Yes ____ No	
EMERGENCY CONTACT: RELATIONSHIP:		CONTACT'S PHONE NO. ( ) ( )		

## EDUCATION:

NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL			
COLLEGE			
TRADE OR OTHER SCHOOL			
SPECIAL TRAINING OR SKILLS:			

## MILITARY SERVICE:

Were you in the armed services? \_\_\_\_ Yes \_\_\_\_ No  
If yes, please fill out below:

DATES OF DUTY:	RANK:	TYPE OF DISCHARGE:
LIST MAJOR RESPONSIBILITIES WHILE IN THE SERVICE AND ANY RELATED TRAINING TO POSITION APPLYING FOR:		

Have you ever pled guilty to or been convicted of anything other than a minor traffic violation?

\_\_\_\_ Yes \_\_\_\_ No If yes explain. \_\_\_\_\_

Have you ever been charged with an offense (other than a minor traffic violation) where adjudication of guilt has been withheld pending probation? \_\_\_\_ Yes \_\_\_\_ No If yes explain. \_\_\_\_\_

*Answering yes to either of the above questions does not automatically bar employment.*

Are you willing to accept employment which requires you to travel? \_\_\_\_ Yes \_\_\_\_ No

**FORMER EMPLOYERS (LAST THREE YEARS REQUIRED):**

DATES MONTH & YEAR	NAME & ADDRESS OF EMPLOYER	SUPERVISOR'S NAME & TITLE	PAY RATE	POSITION & WORK PERFORMED	REASON FOR LEAVING
FROM					
TO:					
FROM					
TO:					
FROM					
TO:					
FROM					
TO:					

**REFERENCES:**

GIVE THE NAMES OF THREE PERSONS, NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	PHONE & ADDRESS	BUSINESS	YEARS KNOWN

**AUTHORIZATION:**

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by the owner.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

Applicant, please **do not** write below this line.

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**REMARKS:**

NEATNESS:		CHARACTER:	
PERSONALITY:		ABILITY:	
HIRED:	POSITION:	WILL REPORT:	WAGES: