

## Absolute Plumbing of North Texas

2803 Justin Rd  
Flower Mound, Texas  
75028

Mon. – Fri. 8a.m. to 4 p.m.  
972-539-1180  
972-539-1170 fax

### EMPLOYMENT APPLICATION

Absolute Plumbing is an equal opportunity employer. If you require an accommodation in order to complete this application, please request assistance from our Office.

*Please type or use black ink*

#### PERSONAL

Name:			SSN:		
Address			Home Telephone: (    )		
City:	State:	Zip:	Other Telephone: (    )		
Email:					

Are you eligible to work in the United States?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
--	------------------------------	-----------------------------

Are you or have you been employed with Travis County?	<input type="checkbox"/> Presently Employed	<input type="checkbox"/> Previously employed
<input type="checkbox"/> Yes <input type="checkbox"/> No	From:	From:                      To:

<b>POSITION APPLIED FOR:</b>	<b>TITLE CODE:</b>
------------------------------	--------------------

#### MILITARY SERVICE

Branch of Service:	Dates of Service:
--------------------	-------------------

#### EDUCATION

Did you graduate High School or achieve a GED?		<input type="checkbox"/> Yes	<input type="checkbox"/> No
University, College, Trade, Business or Correspondence School Completed	Applicants may be required to present proof of graduation	Did you graduate? Yes <input type="checkbox"/>	No <input type="checkbox"/>
Name of School	Specialty or Major	Degree Earned/Date	

#### TRAINING/SKILLS

Are you bilingual?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Language:
--------------------	------------------------------	-----------------------------	-----------

<b>List training/skills which would qualify you for the position you seek.</b>

#### LICENSES/CERTIFICATES

List all current and valid licenses you hold such Drivers or Trade Licenses		
Type	Number	Expiration Date
Drivers License – Operator/Commercial		

## EMPLOYMENT HISTORY

List all employment (including military service) years relevant to the position for which you are applying. Begin with your present or most recent job and work back. Add sheets as required.

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised:</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	

**Reason for leaving:**

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised:</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	

**Reason for leaving:**

## EMPLOYMENT HISTORY, continued

List all employment (including military service) years relevant to the position for which you are applying.

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised:</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	
<b>Reason for leaving:</b>		

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised:</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	
<b>Reason for leaving:</b>		

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised:</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	
<b>Reason for leaving:</b>		

## EMPLOYMENT HISTORY, continued

List all employment (including military service) years relevant to the position for which you are applying.

<b>Job Title:</b>	<b>Supervisor Name/Title:</b>	
<b>Employer:</b>	<b>Number of Employees Supervised</b>	
<b>Address:</b>	<b>Employment Dates: (Month, Year)</b>	
<b>City, State, Zip:</b>	<b>From:</b>	<b>To:</b>
<b>Employer Telephone: (    )</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time	<b>Salary:</b>
<b>Description of Work:</b>	<b>May we contact this employer?   <input type="checkbox"/> Yes   <input type="checkbox"/> No</b>	

**Reason for leaving:**

### BACKGROUND

Have you ever been convicted of any crime other than a minor traffic violation?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, list ALL such offenses: <i>A conviction does not mean you cannot be hired. The offense and how recently you were convicted will be evaluated along with your qualifications in relation to the job for which you are applying.</i>		

### APPLICATION SOURCE – How did you hear about this job vacancy?

<input type="checkbox"/> Internet Web Site	<input type="checkbox"/> Texas WorkSource Center
<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other:
<input type="checkbox"/> Newspaper	Name:

I certify that I have made no willful misrepresentations in this application, nor have I withheld information in my statements and answers to questions. I am aware that the information given by me in my application will be investigated, with my full permission, and that any misrepresentation or omissions may cause my application to be rejected.

**Signature of Applicant :**

**Date:**