



## Employment Application

Please complete the entire application.

### 1. Employer Information

Employer: Pro Cool Inc  
Address: PO BOX 14440  
City/State/ZIP: Archdale, North Carolina 27263  
Telephone: 336-510-0294

It is the policy of Pro Cool Inc to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

### 2. Applicant Information

Applicant Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Number of years at this address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

3. Job Position Applied For: \_\_\_\_\_

Full or Part Time? \_\_\_\_\_

4. Salary Desired: \$ \_\_\_\_\_ per \_\_\_\_\_

5. Who referred you to our company? \_\_\_\_\_

Do you have any friends or relatives who work here? If yes, please list here:

\_\_\_\_\_

6. Are you at least 18 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No

7. Are you at least 21 years old? \_\_\_\_\_ Yes \_\_\_\_\_ No

8. If applicable, are you available to work overtime? \_\_\_\_\_ Yes \_\_\_\_\_ No

9. If you are offered employment, when would you be available to begin work?

\_\_\_\_\_

### 10. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number that corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability or Skill	Years of Experience	Rating
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

### 11. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) that you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_

Is it ok to contact this employer \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_

Is it ok to contact this employer \_\_\_\_\_ Yes \_\_\_\_\_ No

Employment History Cont.

Employer Name: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Job Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Dates of Employment (Month/Year): \_\_\_\_\_

Is it ok to contact this employer \_\_\_\_\_ Yes \_\_\_\_\_ No

12. Applicant's Education and Training

Training (graduate, technical, vocational):

\_\_\_\_\_

Please indicate any current professional licenses or certifications that you hold:

\_\_\_\_\_

Awards, Honors, Special Achievements:

\_\_\_\_\_

13. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

\_\_\_\_\_

\_\_\_\_\_

**Certification**

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application or, if employment commences, immediate termination.

\_\_\_\_\_

Applicant Signature Date