

93 E County Road 200 N Rockport, IN 47635 (812) 649-9820 ~ Office (812) 649-9809 ~ Fax

Sceptre Mechanical is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status. If you feel you have been unfairly treated or discriminated against, please make your concerns known to a member of management so that they may be addressed.

SCEPTRE MECHANICAL PARTICIPATES IN E-VERIFY

Email to HR@SceptreMech.com

EMPLOYMENT APPLICATION - PLEASE PRINT

APPLICANT INFORMATION									
Last Name	First			M.I.	Date				
Street Address				Apartment	/Unit #				
City	State			ZIP					
Phone		E-mail Address							
Date Available Position	olied For	Desired Salary							
Some positions require travel. Are you willing to travel? YES \(\square\) NO \(\square\)									
Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO									
Have you ever worked for this company? YES \(\Bar{\cup} \) NO \(\Bar{\cup} \) If so, when?									
Have you ever been convicted of a crime that has not been expunged by court? YES NO If yes, explain									
Do you have a valid driver's license? YES \(\square\) NO \(\square\) If no, explain									
Are you currently employed? YES NO If no, explain									
EDUCATION									
High School	Addre	ess							
Did you graduate? YES □ NO □ Degree									
College	Address								
Did you graduate? YES □ NO □ Degree									
Other Address									
Did you graduate? YES ☐ NO ☐ Degree									
REFERENCES									
Please list three professional references- please do not li	ist frier	nds or relative	es						
Full Name		Relationship							
Company		Phone ()						
Address									
Full Name		Relationship							
Company		Phone ()						
Address									
Full Name		Relationship							
Company		Phone ()						
Address									

PREVIOUS EMPLOY	YMENT								
Company				Phone ()					
Address				Supervisor					
Job Title			Starting Salary	\$	Ending Salary	\$			
Responsibilities			•						
From T	ō	Reason for Leaving							
May we contact your pre	evious supervisor f	for a reference?	NO 🗆						
Company				Phone ()					
Address			Supervisor						
Job Title			Starting Salary	\$	Ending Salary	\$			
Responsibilities									
From T	ō	Reason for Leaving							
May we contact your pre	May we contact your previous supervisor for a reference?			NO 🗆					
Company			Phone ()						
Address	address			Supervisor					
Job Title			Starting Salary	\$	Ending Salary	\$			
Responsibilities									
From T	Ō	Reason for Leaving							
May we contact your pre	evious supervisor f	for a reference?	YES 🗌	NO 🗆					
Explain any gaps in work	k history								
		- :	VEC. 🗆	NO 🗆					
Have you ever been asked	ed to resign from	а јов?	YES 🗌	NO 🗆					
DESCRIBE ANY SPI	ECIALIZED TR	AINING, APPREN	TICESHIP, SKIL	LS					
DISCLAIMER AND	SIGNATURE								
I certify that the information provided in the attached application is true and complete. I authorize an investigation of all statements contained in my application for employment and understand that any false or misleading statements or material omissions are cause for refusal to hire or separation of employment, if employed. I hereby authorize former and present employers, except as I have otherwise indicated in writing, as well as physicians, medical personnel, criminal record check personnel, references and others to provide or verify any information they have regarding me or my employment with them to Sceptre Mechanical, Inc. (hereinafter called "Sceptre") or its representative and release them from any liability arising from the furnishing of any employment history or medical information to the company.									
According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained from a consumer reporting agency. If so, I will be notified and given the name, address, and phone number of the agency which provided the information. In addition, I have been informed that I will have a reasonable opportunity to clear up any mistaken information reported within a reasonable timeframe established within the sole discretion of Sceptre. Under the Fair Credit Reporting Act, I have been advised that upon request I will be provided the name, address, and telephone number of the reporting agency as well as the nature, substance and source of all information. I acknowledge that facsimile, copy or email shall be as valid as the original.									
I understand that the needs of Sceptre may require that I be assigned increased hours, decreased hours, shift work, overtime work, weekend work, rotation shifts or other work schedule arrangements or changes in my work schedule or hours as a condition of employment with Sceptre.									
I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of Sceptre. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will, and that either I or Sceptre may terminate my employment at any time with or without notice or cause. My employment or offer of employment establishes no guarantee or promise of continued employment or set hours of work or any other obligation on the part of Sceptre beyond pay for actual work performed at the agreed upon rate.									
Signature					Date				