



Employment and Craft Training Application

Name (Last, first, middle initial) Mr. Mrs. Ms.

I am applying for employment and training I am applying for training only

Social Security Number

Address (Number and Street)

City, State, Zip

Date of Birth

Telephone Number(s) Home

Other

Position Applying For Carpenter Foreman Superintendent Electrician

Education and Training

Education (circle last grade completed) 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20

Name and location of last high school attended

Did you graduate? GED Certificate?

Names and locations of any college, university or technical school attended

Major, Minor, Type of Degree

List any certificates received from post secondary institution

Please list any special qualifications or skills relevant to the position you are seeking

Do you have a valid driver's license?

Employment History

Present or Most Recent Employer

Phone

Address

Your Title

Duties

Reason for leaving or seeking other employer

Dates of Employment

Previous Employer

Phone

Address

Your Title

Duties

Reason for leaving or seeking other employer

Dates of Employment

Previous Employer	Phone
Address	Your Title
Duties	Reason for leaving or seeking other employer
Dates of Employment	

References

List three persons who are related to you and who have definite knowledge of your skills and personal qualities related to the position for which you are applying.

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment and training and immediate termination of employment and training status regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by any company participating in the West Tennessee Chapter of Associated Builders and Contractors Education Trust. (herein referred to as Education Trust) that such employment with that company is in accordance, for no specified duration and may be terminated by either the employer or myself and any time, with or without cause or notice. I understand that the Education Trust is a craft training and referral entity and does not an employer. I understand that none of the documents, policies, procedures, actions, statements of Education Trust or its representatives used during the application, placement and training process is deemed a contract of employment real or implied. I understand that no representative of the Education Trust has the authority to enter into any agreement guaranteeing any conditions of employment.

In consideration for training by the Education Trust, if accepted, I agree to conform to the rules, regulations policies and procedures of the Education Trust at all times and understand that such obedience is a condition of remaining enrolled in the training program. I understand that due to the nature of the training program, attendance and punctuality are considered essential requirements.

I understand that to be offered a position with a participating employer, I am required to submit to a drug screening. I understand that if offered a position with an Education Trust affiliated company, I may be required to submit to a pre-employment medical examination, an additional drug screen and background check as a condition of employment. I understand that unsatisfactory results from, or refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment or termination of employment if already employed by a participating employer. I grant permission for a participating employer considering offering employment to me to make an investigative consumer report which may contain information obtained through personal interviews with friends, neighbors, former employers and acquaintances, as it deems proper about my employment history, work habits, job performance, educational background, character, general reputation, personal characteristics and mode of living; and I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to release and furnish such information they may have regarding me or my employment. I release and agree to hold harmless all parties involved from any and all liability arising out of furnishing any information or any investigation or for taking any action based upon the information provided. If an investigative consumer reporting agency is engaged to report on my credit and personal history, authorization is hereby granted to do so. If a report is obtained, the name of the agency will be provided, at my request, so that I may obtain from them the nature and substance of the information contained in the report.

I understand that this application is considered current for three months. If I wish to be considered for employment and training after this period, I must fill out and submit a new application. I further agree to pay the the \$25 non-refundable application fee required to submit this application and be considered for employment by a participating company.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature _____ Date _____

Name and number of person completing this form if other than applicant _____

ABC IS PROUD TO BE AN EQUAL OPPORTUNITY EDUCATIONAL PROVIDER AND EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.