



11184 River Road NE
Hanover, MN 55341
763-498-8071
www.WestAirHeating.com

HVAC EMPLOYMENT APPLICATION

POSITION APPLYING FOR: _____

DATE: _____

NAME	HOME PHONE
ADDRESS	CELL PHONE
CITY/STATE/ZIP	SOCIAL SECURITY NUMBER
EMAIL ADDRESS	HOW DID YOU HEAR ABOUT WestAIR Heating & Cooling?

EMPLOYMENT INFORMATION

CURRENT EMPLOYER: _____ ARE YOU 18 YEARS OR OLDER? ☐ YES ☐ NO

ON YOUR FIRST DAY OF EMPLOYMENT WILL YOU BE ABLE TO PROVIDE DOCUMENTATION THAT YOU CAN LEGALLY WORK IN THE U.S.? ☐ YES ☐ NO

LEVEL OF EXPERIENCE RELEVANT TO THE POSITION YOU ARE APPLYING FOR:

☐ ENTRY LEVEL (LESS THEN 2 YEARS) ☐ MID-CAREER (2-4 YEARS) ☐ TENURED CAREER (5 PLUS YEARS)

EMPLOYMENT TYPE DESIRED: ☐ FULL-TIME ☐ PART-TIME DESIRED COMPENSATION: \$ _____ ☐ HOURLY ☐ ANNUAL

WHEN ARE YOU AVAILABLE TO START WORK? _____

ARE YOU AVAILABLE TO WORK OVERTIME, EVENINGS AND WEEKENDS? ☐ YES ☐ NO

WILL YOU CONSENT TO A BACKGROUND CHECK INCLUDING CRIMINAL, EMPLOYMENT AND DRUG SCREENING? ☐ YES ☐ NO

EDUCATION INFORMATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
HIGH SCHOOL				
COLLEGE/UNIVERSITY				
BUS. OR TRADE SCHOOL				

CRIMINAL HISTORY

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? ☐ YES ☐ NO

IF YES, PLEASE EXPLAIN AND ATTACH ANY RELEVANT DOCUMENTATION. _____

DRIVERS LICENSE INFORMATION

DO YOU HAVE A VALID DRIVER'S LICENSE? ☐ YES ☐ NO

DO YOU HAVE RELIABLE TRANSPORTATION TO WORK (PLEASE BE SPECIFIC): _____

DRIVER'S LICENSE NUMBER _____

STATE OF ISSUE _____ EXP. DATE _____ CLASS _____

DO YOU HAVE A CLEAN DRIVING RECORD? _____

MILITARY SERVICE

HAVE YOU EVER BEEN IN THE ARMED FORCES? ☐ YES ☐ NO BRANCH: _____

ARE YOU A MEMBER OF THE NATIONAL GUARD? ☐ YES ☐ NO

SPECIALTY: _____ DATE ENTERED: _____ DISCHARGE DATE: _____

WORK EXPERIENCE

PLEASE LIST YOUR WORK EXPERIENCE FOR THE PAST 5 YEARS BEGINNING WITH YOUR MOST RECENT/CURRENT JOB. PLEASE ATTACH RESUME IF APPLICABLE.

NAME OF EMPLOYER: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE NUMBER: _____ SUPERVISOR/PHONE: _____

EMPLOYMENT DATES: _____

PAY OR SALARY: START: \$ _____ FINAL: \$ _____

YOUR JOB TITLE: _____

REASON FOR LEAVING (BE SPECIFIC): _____

LIST THE JOBS HELD, DUTIES PERFORMED, SKILLS USED/LEARNED, PROMOTIONS WHILE AT THIS COMPANY: _____

MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO

NAME OF EMPLOYER: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE NUMBER: _____ SUPERVISOR/PHONE: _____

EMPLOYMENT DATES: _____

PAY OR SALARY: START: \$ _____ FINAL: \$ _____

YOUR JOB TITLE: _____

REASON FOR LEAVING (BE SPECIFIC): _____

LIST THE JOBS HELD, DUTIES PERFORMED, SKILLS USED/LEARNED, PROMOTIONS WHILE AT THIS COMPANY: _____

MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO

NAME OF EMPLOYER: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

PHONE NUMBER: _____ SUPERVISOR/PHONE: _____

EMPLOYMENT DATES: _____

PAY OR SALARY: START: \$ _____ FINAL: \$ _____

YOUR JOB TITLE: _____

REASON FOR LEAVING (BE SPECIFIC): _____

LIST THE JOBS HELD, DUTIES PERFORMED, SKILLS USED/LEARNED, PROMOTIONS WHILE AT THIS COMPANY: _____

MAY WE CONTACT THIS EMPLOYER? ☐ YES ☐ NO

SKILLS AND QUALIFICATIONS

PLEASE SUMMARIZE ANY TRAINING, SKILLS, LICENSES, AND/OR CERTIFICATES THAT MAY QUALIFY YOU AS BEING ABLE TO PERFORM JOB RELATED FUNCTIONS IN THE POSITION YOU ARE APPLYING.

DO YOU HAVE ANY CONSTRUCTION EXPERIENCE? ☐ YES ☐ NO

DO YOU HAVE ANY HVAC RESIDENTIAL INSTALLATION EXPERIENCE? ☐ YES ☐ NO COMMERCIAL? ☐ YES ☐ NO

HOW MANY YEARS OF CUSTOMER SERVICE EXPERIENCE DO YOU HAVE? _____

HOW MANY COMPETENCY CARDS DO YOU HAVE? _____

ARE YOU ABLE TO PERFORM PHYSICAL ACTIONS? THESE MAY INCLUDE CLIMBING AROUND IN AN ATTIC OR UNDERNEATH A HOME, ON A ROOFTOP, LIFTING AND CARRYING HEAVY OBJECTS (LADDERS), STOOPING, SQUATTING, BENDING, OR REACHING? ☐ YES ☐ NO

PERSONAL REFERENCES

PLEASE PROVIDE TWO INDIVIDUALS, NOT RELATIVES, WHOM YOU HAVE KNOWN AT LEAST 1 YEAR.

NAME

PHONE

ADDRESS

CITY/STATE/ZIP

YEARS KNOWN

NAME

PHONE

ADDRESS

CITY/STATE/ZIP

YEARS KNOWN

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with WestAIR Inc. creates an actual or implied contract of employment. I understand that, if I accept employment with WestAIR Inc., it will be on an at-will basis. This means that either WestAIR Inc. or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by WestAIR Inc. I release WestAIR Inc. and its employees, plus other persons or companies, from and all liability arising out of or related in any way to such testing.

I authorize WestAIR Inc. to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release WestAIR Inc. and its employees from all liability arising from such investigation.

Signature Of Applicant: _____ Date: _____

Print Name: _____

WestAIR Inc. is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with WestAIR Inc. depends solely on your qualifications.