

# Watts Inc – P M W Electric Employment Application

This Employment Application is confidential property of Watts Inc d/b/a P M W Electric.

	Office	e use only	
Name	Date _	Position	
	Interviewed by		
Neatness	Personality	Ability	
	Hired [ ] Y [ ] N Report Date	Salary	
Remarks			
-			

### **Employment Application**

#### **An Equal Opportunity Employer**

Company is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law

Please print and fill out all sections. If your application does not provide all the information requested on this form, you may lose consideration for a job.

#### **Applicant Information**

Applicant Name	Home Phone
Other	Email Address
Wisc Credential #	Date of Birth
Divers License Number	
Current Address	Previous Address (if Current less than 2 Yrs.)
Length At Address	Length At Address
Number and street	Number and street
City	City
State & Zip	State & Zip
How were you referred to this Company? _	

We are seeking an experienced & self-motivated Electrician. Must have clean Wisconsin drivers license and good background. Applicant must be current on all local, state and national codes and have commercial and residential service experience. You will be required to work independently.

#### **General Responsibilities**

- · Electrical System Troubleshooting
- · Communication Wiring (telephone, TV, data etc.)
- · Problem Solving
- · Work off Blueprint
- · Inventory Management
- · Attention to Detail
- · Start and complete work without assistance
- · Maintain a professional attitude and appearance
- · Ability to communicate well with customers and employees
- · Basic Safety

#### Requirements

- Possess a valid drivers license
- Own and use necessary hand tools

- Maintain paperwork necessary to support all activities

#### **Physical Requirements/Working Conditions**

- Must be able to lift objects weighing 50 pounds from floor level to waist level. Items lifted are often bulky and difficult to handle
- Must be able to climb and work off of a ladder or scaffold
- Must be able to ascend and descend 1,000 steps a day
- Must be able to use arms and back to tighten and loosen nuts and bolts
- Must be able to carry a 50-pounds up a flight of stairs
- Must be able to work in constricted places
- Must be able to reach, stoop, or bend to work.
- Must be able to work outdoors in all types of weather

#### Salary/Benefits:

- -Salary commensurate with experience
- -Medical Plans
- -Life and Accidental Death & Dismemberment Insurance
- -Paid Holidays and Vacation
- -Tuition Reimbursement

**Employment Desired** 

	(s) applying for:  applying for:
• T	emporary work – such as summer or holiday work? [] Y or [] N
• R	Regular part-time work? [] Y or [] N
• R	tegular full-time work? [] Y or [] N

If hired, on what date can you start working?/	/
Can you work on the weekends? [ ] Y or [ ] N	Can you work evenings? [] Y or [] N
Are you available to work overtime? [ ] Y or [ ] N	
Hourly Salary desired: \$	

#### **Personal Information**

Have you ever applied to / worked for Company before? [] Y or [] N
If yes, please explain (include date):

Do you have any friends, relatives, or acquaintances working for Company? [] Y or [] N If yes, state name & relationship:
If hired, would you have transportation to/from work? [] Y or [] N Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.) [] Y or [] N If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? [] Y or [] N If hired, are you willing to submit to and pass a controlled substance test? [] Y or [] N Do you now or have you ever had any physical or medical ailment that has or may interfere with the performance of your job? [] Y or [] N. If Yes Describe.
Have you ever been hospitalized? [] Y or [] N. If Yes Describe.
Have you ever had surgery? [ ] Y or [ ] N. If Yes Describe.
Have you ever been administered a controlled substance test? [ ] Y or [ ] N Have you ever failed a controlled substance test? [ ] Y or [ ] N. If Yes Explain.
Do you have a valid drivers license? [] Y or [] N Side jobs are not allowed with this company, would this be a factor for your employment? [] Y or [] N. Are side jobs a part of your income requirements? [] Y or [] N. What are your longtime employment goals?
Are you able to perform the essential functions of the job for which you are applying? [] Y or [] N  If no, describe the functions that cannot be performed  Have you ever been convicted of a criminal offense (felony or misdemeanor)? [] Y or [] N  If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the
(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

## **Education, Training and Experience**

High School: School name: School city, state, zip:	School address:
Number of years completed: Degree / diploma earned:	Did you graduate? [ ] Y or [ ] N Graduation Year
College / University: School name: School city, state, zip:	School address:
Number of years completed: Degree / diploma earned:	Did you graduate? [ ] Y or [ ] N Graduation Year
Vocational School:  Name: City, state, zip:	Address:
Number of years completed: Degree / diploma? :	Did you graduate? [] Y or [] N Graduation Year
Military: Branch: Total Years of Service: Related details:	Rank in Military:Skills/duties:
<b>Employment History</b> Please separate your years of experience by the following the following separate your years of experience by the following separate your years of experience years of exper	owing items:
yrs. commercial	
yrs. residential	
yrs. other Are you currently employed? [ ] Y or [ ] N	
If you are currently employed, may we contact your	current employer? [ ] Y or [ ] N
Below, please describe past and present employment periods of unemployment. Even if you have attach	at positions, dating back ten years. Please account for all ed a resume, this section must be completed.
Name of Employer: Telephone Number: Address:	Name of Supervisor: Business Type: City, state, zip:
Length of Employment (Include Dates): FromPosition & Duties:	To

Name of Employer:	Name of Supervisor:
Telephone Number:	Business Type:
Address:	City, state, zip:
Length of Employment (Include Dates): FromPosition & Duties:	
Name of Employer	Name of Supervisor
Name of Employer: Telephone Number:	Name of Supervisor:  Business Type:
Address:	City, state, zip:
Length of Employment (Include Dates): From Position & Duties: Reason for Leaving: May we contact this employer for references? [ ] Y	To
References List below three persons who have knowledge of y	your work performance within the last four years.
Please include professional references only.	
Name - First, Last:	
Telephone Number:	Address:
City, state, zip:	Occupation:
Number of Tears Acquamted.	<u> </u>
Name - First, Last:	
Telephone Number:	Address:
City, state, zip:	Occupation:
City, state, zip:	<u></u>
Name - First, Last:	
Telephone Number:	Address:
City state zip:	Address: Occupation:
City, state, zip:	
PRE-EMPLOYMENT TEST	
	in the electrical field. Code References are not required. Answer all ou have received. Some answers are open-ended and will require extended
1.) What is the longest allowable length of LFNC (Carflex)?	?ft.
2.) What residential kitchen receptacles require Gfci protect	ion?
3.) What residential basement receptacles require Gfci protection	ction?

4.) What residential outside receptacles require Gfci protection?
5.) When and Where are fan braces / boxes required to be installed?
6.) When can you use a 3 wire circuit with a Gfci breaker?
7.) When can you use a 3 wire circuit with a Gfci receptacle?
8.) When do you not need to ground a Gfci receptacle?
9.) What wires must be pigtailed in a feed thru receptacle j-box?
10.) When can you reuse an existing circuit while replacing a furnace?
<ul><li>11.) When is a new circuit required for a bath receptacle?</li><li>12.) When is a single receptacle required in a residence?</li></ul>
13.) When can you use a Westinghouse/Bryant breaker in a Murray panel?
14.) What is the maximum distance Romex can be stapled from a j-box? inches.  15.) What is the maximum distance EMT can be strapped from a j-box? inches.  16.) What depth must a trench be for UF cable? inches Residential with Gfci protection inches  17.) When is a duplex grounding receptacle not required to be grounded?
18.) How many #8 thhn wires can be installed in a 1/2" EMT pipe?  19.) What are all of the necessary clearances for a disconnect? inches wide inches deep feet tall or
20.) What is the maximum distance from the floor that a disconnect can be installed?  21.) When can you install a bath fan above a shower/tub?
22.) When is a single receptacle required in a commercial location?

23.) What is the first fitting to be installed upon exiting grade when rigid pipe is installed running past an underground fuel tank?
24.) What are the layout requirements for receptacles in a bedroom?
25.) What is the maximum number of degrees of bend allowed in a run of pipe between two pull points?
26.) When can a service panel be installed behind a washer?
27.) How many ground rods are required when installing a 200 amp Commercial service? Residential service
28.) When can a 3 wire dryer receptacle be installed?
29.) How many small appliance circuits are required in a kitchen?
30.) What are the clearances required for an a/c disconnect?
31.) When can you be sure a receptacle is working?
32.) When is labeling a panel required when installing a new circuit?
33.) When is labeling a panel not required when installing a new circuit?
Please Read and Initial Each Paragraph, then Sign Below  I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate termination of employment.  Initials  I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or the company.  Initials
I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation.  Initials
Applicant's Signature:
Date: