



## West Texas Cooling Tower Application for Employment

WEST TEXAS COOLING TOWER is an equal opportunity employer, and it is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, disability, or other protected classifications.

### Employment Application

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Telephone No: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Valid DL/ID Number: \_\_\_\_\_ State Issued: \_\_\_\_\_

### Emergency Contact

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

### Military Service

Branch: \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_

### Education

Highest Level of Schooling Achieved & Location: \_\_\_\_\_

### Referral Source

How did you hear about us? \_\_\_\_\_

Have you previously worked for WEST TEXAS COOLING TOWER? YES ☐ NO ☐ If yes, when?

\_\_\_\_\_

### Position Information

Position Applying For: \_\_\_\_\_ Date Available to Start: \_\_\_\_\_

Rate of Pay Expected: \_\_\_\_\_ Years of Warehouse Experience: \_\_\_\_\_

Are you authorized to work in the United States on an unrestricted basis? YES ☐ NO ☐

List any specific skills, qualifications, or knowledge you have regarding Cooling Tower work, including safety training:

\_\_\_\_\_  
\_\_\_\_\_

Have you plead "guilty" or "no contest" or been convicted of a crime in the past (7) years? Convictions will not necessarily disqualify an applicant from employment. YES ☐ NO ☐

If yes, please explain: \_\_\_\_\_

If offered a position with WEST TEXAS COOLING TOWER, you will undergo pre-employment screening that includes a drug screen and background check. Drug screening could include a urinalysis and hair follicle test at any point in time of employment. Do you consent? YES ☐ NO ☐

### Employment History

Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor Name & Phone No: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hourly Wages: \_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ To: \_\_\_\_\_

Supervisor Name & Phone No: \_\_\_\_\_

Job Title: \_\_\_\_\_ Hourly Wages: \_\_\_\_\_

Reason for Leaving? \_\_\_\_\_

### Verification Statement

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employee may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_