



HEATING AND COOLING LLC.

(564) 222-0717

[info@derrheating.com](mailto:info@derrheating.com)

Mailstop: PO Box 383  
Indianola, WA 98342

Office: 26282 Lindvog Rd  
Kingston, WA 98346

## Employment Application

### Applicant Information

Full  
Name:

Date:

*Last*

*First*

*M.I.*

Address:

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone:

Email

Date Available:

Social Security No.:

Desired Salary: \$

Position Applied  
for:

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 NO

If yes, when?

Have you ever been convicted of a  
felony?

YES NO

If yes,  
explain:

## Education

High School: \_\_\_\_\_ Address : \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Diploma : \_\_\_\_\_

College or Higher Ed School \_\_\_\_\_ Address : \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES NO Degree: \_\_\_\_\_

## References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_

### Previous Employment – Please Attach Resume

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO

### Military Service

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

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable,  
explain: \_\_\_\_\_

### Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Please print name to act as Signature below. (Adobe Acrobat Reader required for Mac or PC. For download, click here. )*

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