



GMI Mechanical

5516 W. 110<sup>th</sup> St. Ste. 13 Oak Lawn, IL 60453

(877) 421-3220 | Commercial@gogmimechanical.com

## Employment Application

*It is the policy of GMI mechanical to provide equal opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.*

### **Applicant Information:**

Applicant Full Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

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

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

Driver's License (State/Number): \_\_\_\_\_

### **Emergency Contact:**

Who should be contacted if you are involved in an emergency?

Contact Name: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

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

City/State/ZIP: \_\_\_\_\_

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

### **Job position Applying for: Technician**

Salary Desired \$\_\_\_\_\_ per \_\_\_\_\_

**Are you at least 18 years old?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Are you willing to work any shift, including weekends?** \_\_\_\_\_ Yes \_\_\_\_\_ No

If offered employment, when would you be available to begin work? \_\_\_\_\_

Applicants Skills: List any skills that may be useful for the job you are seeking. Enter number of years of experience and circle the number which corresponds to your ability for each skill (One represents poor ability, while five represents exceptional ability.)

Skill:	Years of Experience	Ability/Rating
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

**Certifications and Licenses:** 13. Do you hold any relevant certifications or licenses? (Circle all that apply)

- HVAC Technician License
- EPA 608 Certification
- NATE Certification
- Other: \_\_\_\_\_

**Professional Experience:** Please list your previous relevant employment, starting with the most recent:

- Company: \_\_\_\_\_
  - Position: \_\_\_\_\_
  - Dates Employed: \_\_\_\_\_
  - Reason for leaving: \_\_\_\_\_
- 
- Company: \_\_\_\_\_
  - Position: \_\_\_\_\_
  - Dates Employed: \_\_\_\_\_
  - Reason for leaving: \_\_\_\_\_
- 
- Company: \_\_\_\_\_
  - Position: \_\_\_\_\_
  - Dates Employed: \_\_\_\_\_
  - Reason for leaving: \_\_\_\_\_

(Continue on a separate sheet if needed)

Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

\_\_\_\_\_

**CERTIFICATION:**

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize GMI Mechanical to contact former employers regarding my employment and education. I authorize my former employers to communicate information fully and freely regarding my previous employment and attendance.

**I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND UNDERSTAND AND AGREE TO ITS TERMS.**

\_\_\_\_\_

APPLICANT SIGNATURE

\_\_\_\_\_

DATE

Please email Application to [Commercial@gogmimechanical.com](mailto:Commercial@gogmimechanical.com)