

Charlotte Mechanical, LLC
 14301 S Lakes Dr, Ste E
 Charlotte, NC 28273
 [T]: 704.847.1198
 [F]: 704.847.4377



Applying for:
 Technician
 Installer
 Plumber
 Other: _____

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

General Information

(Incomplete applications will not be processed.)

Please print thoroughly in ink.

Name: Last _____ First _____ Middle _____
 Date of Birth: _____ Social Security #: _____ - _____ - _____
 Home Phone: (_____) _____ - _____ Contact Phone: (_____) _____ - _____
 Current Address: _____ City: _____
 State: _____ Zip: _____ How long at this address? _____ (Include past address if less than 5 years)
 Past Address: _____ How long at this address? _____

Driver's License Information

State	License Number	Class	Endorsements	Expiration Date
1.				
2.				

Are you authorized to work in the United States? Yes No

Do you take any medication that could affect your driving? Yes No

Has your license ever been denied, revoked, or suspended? Yes No

Details: _____

Have you ever worked/applied for work at Charlotte Mechanical, LLC? Yes No

How did you hear about Charlotte Mechanical, LLC? _____

Education

Name of School	City/State	Did you graduate?	If No, years left to graduate	If Yes, graduation date	Degree received	Major
High School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
GED:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
Tech/Trade School:		<input type="checkbox"/> Yes <input type="checkbox"/> No				
College:		<input type="checkbox"/> Yes <input type="checkbox"/> No				

Other certifications, licenses, and training (e.g., EPA or NATE certified) relevant to the job(s) for which you are applying:

Employment History

A complete record of employment for the past ten years is necessary for your application to be processed. Please list your present employer first. All periods of time must be accounted for during this ten-year period, including military service, self-employment, and periods of unemployment. Provide **complete address** and **phone numbers**, including area codes and zip codes.

DATE AVAILABLE FOR WORK: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

From: _____ To: _____
Company Name: _____ Phone: (_____) _____ - _____
Street Address: _____ City: _____
State: _____ Zip: _____ Position: _____ Ending Pay: _____
Reason for leaving: _____
Description of work performed: _____

Personal References

(Do not use relatives or former employers)

1. _____ (____) ____ - _____
Name Occupation Phone Number
2. _____ (____) ____ - _____
Name Occupation Phone Number
3. _____ (____) ____ - _____
Name Occupation Phone Number

CREDIT, CRIMINAL, AND DRIVING RECORD INFORMATION DISCLOSURE AND CONSENT

By my signature below, I authorize Charlotte Mechanical, LLC or Morrow Insurance Agency, Inc. to obtain information – written, oral, or other – from a consumer reporting agency bearing on my creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living, criminal background, and driving background. I understand that this investigation may include interviews with friends, acquaintances, or others who may have relevant information and that this report will be used for employment purposes, including evaluating me for employment, promotion, reassignment, or retention as an employee of Charlotte Mechanical, LLC. I understand that I have a right to request disclosure of the nature and scope of the report, including the name, address, and phone number of the consumer-reporting agency, if the report involves personal interviews with sources such as my friends, acquaintances, or others who may have relevant information. Finally, notwithstanding anything else in this document, I understand Charlotte Mechanical, LLC reserves the ability to avail itself of any rights set forth in any applicable federal, state, or local law, including the Fair Credit Reporting Act, as amended by the Fair and Accurate Credit Transactions Act (the “FACT Act”).

Signature Date

Last Name First Name Middle Initial Maiden Name

Street Address

City State Zip Code

Social Security Number Driver's License Number State
