## **JOB APPLICATION**

## Home Elevator of Houston 9137 Spring Branch Dr., Ste. 305, Houston, Texas 77080 713-360-7353

Home Elevator Of Houston 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. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below:

**Applicant Information** 

| Applicant Name:  |             |     |
|--|-------------|-----|
| Address:   |             |     |
| City, State and Zip Code:  |             |     |
| Telephone Number:  |             |     |
| Email Address:   |             |     |
| Date of Application:   |             |     |
| <u>Employment Position</u>   |             |     |
| Position(s) applying for: Mechanic and Helpers (part time)   |             |     |
| How did you hear about this position?  |             |     |
| If needed, are you available to work overtime?   |             |     |
| On what date can you start working if you are hired?   |             |     |
| Do you have reliable transportation to and from work?  |             |     |
| Salary desired:  |             |     |
| Personal Information   |             |     |
| Have you ever applied to or worked for Home Elevator of Houston before?                                | Yes         | No  |
| If yes, when?  |             |     |
| Do you have any friends, relatives, or acquaintances working for Home Elevator of Houston              |             | NI. |
| If yes, state name & relationship:   | Yes         | No  |
| A 40   | <br>        |     |
| Are you 18 years of age or older?  | Yes         | No  |
| Are you a U.S. citizen or approved to work in the United States?                                       | Yes         | No  |
| What document can you provide as proof of citizenship or legal status?                                 |             |     |
| Will you consent to a mandatory controlled substance test?   | <br>Yes     | No  |
| Have you ever been convicted of a criminal offense (felony or misdemeanor)?                            | Yes         | No  |
| If yes, please state the nature of the crime(s), when and where convicted and disposition of the case: |             |     |
|  |             |     |
|  | <del></del> |     |

| (Note: No applicant will be denied em<br>nature of the offense, including any si<br>the relevance of the offense to the pos | gnificant details that affect the de | scription of the event, and the |                              |
|---|--------------------------------------|---------------------------------|------------------------------|
| <b>Job Skills/Qualifications</b><br>Please list below the skills and qualific   | ations you possess for the position  | for which you are applying:     |                              |
|   |                                      |                                 |                              |
|   |                                      |                                 |                              |
|   |                                      |                                 |                              |
|   |                                      |                                 |                              |
| (Note: Home Elevator of Houston com<br>for eligible applicants/employees to pe  |                                      | asonable accommodation me       | asures that may be necessary |
| Education and Training  |                                      |                                 |                              |
| High School   |                                      |                                 |                              |
| Name  | Location (City, State)               | Year Graduated                  | Degree Earned                |
|   |                                      |                                 |                              |
| College/University  |                                      |                                 |                              |
| Name  | Location (City, State)               | Year Graduated                  | Degree Earned                |
|   |                                      |                                 |                              |
| Vocational School/Specialized Trainin   | σ                                    |                                 |                              |
| Name  | Location (City, State)               | Year Graduated                  | Degree Earned                |
|   | 2008.011 (0.04), 0.000               | Tour Gradates                   | 208.00 20.1100               |
|   |                                      |                                 |                              |
| Military:   |                                      |                                 |                              |
| Are you a member of the Armed Serv  | vices?                               |                                 |                              |
| What branch of the military did you e   | enlist?                              |                                 |                              |
| What was your military rank when di   | scharged?                            |                                 |                              |
| How many years did you serve in the   | military?                            |                                 |                              |
| What military skills do you possess th  | at would be an asset for this positi | on?                             |                              |
|   |                                      |                                 |                              |
|   |                                      |                                 |                              |
| <u>Previous Employment</u>  |                                      |                                 |                              |
| Employer Name:  | -                                    |                                 |                              |
| Job Title:  |                                      |                                 |                              |
| Supervisor Name:<br>Employer Address:   | -                                    |                                 |                              |
| City, State and Zip Code:   | -                                    |                                 |                              |
| Employer Telephone:   |                                      |                                 |                              |
| Dates Employed:   | ·                                    |                                 |                              |
| Reason for leaving:   |                                      |                                 |                              |
|   |                                      |                                 |                              |
| Employer Name:  |                                      |                                 |                              |
| Job Title:  |                                      |                                 |                              |
| Supervisor Name:<br>Employer Address:   |                                      |                                 |                              |
| City State and Zin Code:  | -                                    |                                 |                              |

| Employer Telephone:   |  |  |  |
|---|--|--|--|
| Dates Employed:   |  |  |  |
| Reason for leaving:   |  |  |  |
| Employer Name:  |  |  |  |
| Job Title:  |  |  |  |
| Supervisor Name:  |  |  |  |
| Employer Address:   |  |  |  |
| City, State and Zip Code:   |  |  |  |
| Employer Telephone:   |  |  |  |
| Dates Employed:   |  |  |  |
| Reason for leaving:   |  |  |  |
| <b>References</b> Please provide 2 personal and profession  | onal reference(s) below:   |  |  |
| Reference   |  | Contact Information  |  |
| Reference   |  | Contact information  |  |
|   |  |  |  |
| Additional Information:  Do you have fear of heights?  Are you in good physical condition?  |  |  |  |
| Can you lift 60 LBS?  |  |  |  |
| employment can be terminated at an Elevator of Houston. No representation foregoing "employment at will" relation or written statements or representation | y time for any reason, wive of Home Elevator of Hoship. You understand that<br>ons regarding your employ | ston is referred to as "employment at will." This meanith or without cause, with or without notice, by you also do not have authority to enter into any agreement control tyour employment is "at will," and that you acknowledge yment can alter your at-will employment status, except /Chief Operations Officer or the Company's President. | or the Home<br>ntrary to the<br>e that no oral |
| Applicant Signature:  |  | Dated:   |  |
|   |  |  |  |



## **Additional Questions and Instructions for Employment Application**

| Application Questions  |  |  |  |  |
|--|--|--|--|--|
| Please complete the questions below as part of your employment application:              |  |  |  |  |
| How many years of Mechanic experience do you have?                                       |  |  |  |  |
| Do you reside in the Houston, TX area?   |  |  |  |  |
| Have you completed the following level of education: High school or equivalent?          |  |  |  |  |
| Do you have a valid Driver's License?  |  |  |  |  |
| Are you willing to undergo a background check, in accordance with local law/regulations? |  |  |  |  |
|  |  |  |  |  |
| Are you authorized to work in the United States?   |  |  |  |  |
| Do you speak and understand English?   |  |  |  |  |
| Are you able to commute to jobs located in the greater Houston metro area?               |  |  |  |  |
| When are you available to start this job?  |  |  |  |  |
|  |  |  |  |  |

## **Instructions to Send Your Application**

Send your completed and signed application including these additional questions to <a href="mailto:info@homeelevatorofhouston.com">info@homeelevatorofhouston.com</a>. You may scan your completed forms or take a picture with your smartphone then email.

If you have questions, please call 713 360 7353.