



## APPLICATION FOR EMPLOYMENT

**PLEASE PRINT**

Comfort Systems USA – Central Texas is an Equal Opportunity Employer. Applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

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Position(s) applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone # \_\_\_\_\_ Other Phone # \_\_\_\_\_

Email: \_\_\_\_\_

**Referral Source:**      Online/Website      Employee Referral      Government Agency  
                                 Walk-in                      Private Employment Agency      Other

Name of Referral Source (if applicable) \_\_\_\_\_

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Type of employment desired:    Full Time      Part-Time      Temporary

Shifts you can work:    Day      Evening      Weekend

Date available for work: \_\_\_\_\_ Salary Desired: \$ \_\_\_\_\_

Are you subject to any non-compete or other restriction with a current or former employer?    Yes      No

*If you answered yes above, please provide a copy of the covenant not to compete or contractual restriction*

Are you able to perform the essential duties of the job you are applying for?    Yes      No

If no, please explain: \_\_\_\_\_

Have you ever worked for Comfort Systems USA or one of its affiliates?    Yes      No

If yes, dates of employment and location: \_\_\_\_\_



**EMPLOYMENT HISTORY**

Provide the following information for your past and current employers, starting with the most recent (you may attach resume if available). Explain any gaps in employment in comments section below.

Company Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of job duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
May we contact employer: Yes No Eligible for Rehire: Yes No

Company Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of job duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
May we contact employer: Yes No Eligible for Rehire: Yes No

Company Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of job duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
May we contact employer: Yes No Eligible for Rehire: Yes No

Company Name: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Description of job duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ Final Salary: \_\_\_\_\_  
May we contact employer: Yes No Eligible for Rehire: Yes No



**Comments** (Include explanation of any gaps in employment): \_\_\_\_\_

\_\_\_\_\_

**Skills and Qualifications:** Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

\_\_\_\_\_

**EDUCATIONAL BACKGROUND**

Provide the following information for your educational background.

Type of School	Name of Location	Diploma/Degree	Major
High School			
Junior College			
College/University			
Trade School			
Other			

**REFERENCES**

List name and telephone number of three business/work references that are not related to you. If not applicable, list three school or personal references that are not related to you.

Name	Telephone #	Relationship	Years Acquainted



I certify that the information provided by me in this application is true and complete to the best of my knowledge. I understand that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or immediate termination.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information. I further authorize pre-employment drug testing as well as authorize a background check, and understand that my results must meet the company standards for employment or my offer will be rescinded.

If I am hired, I understand that employment is "AT WILL" and I am free to resign at any time, with or without cause and without prior notice. I further understand that the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. I understand this application does not constitute an agreement or contract for employment for any specified period or definite duration. I further understand no promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding unless made in writing.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, and federal law.

I understand that if employed, policies and rules which are issued are not conditions of employment and the employer may revise policies or procedures, in whole or in part, at any time. If employed, I will abide by the rules and policies of the company. I understand that his application will be kept on active file for 6 months from the date completed, after which time I would have to reapply in accordance with established company procedures.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

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