RIVIERA ELECTRIC

APPLICATION # _____

PHONE # _____

RIVIERA ELECTRIC IS AN EQUAL OPPORTUNITY EMPLOYER

Employment Application for Electricians, Apprentice Electricians and Field Support. This application must be completed in full or it will not be considered as an Application for Employment.

PERSONAL INFORMATION:

LAST NAME _____ MIDDLE _____ FIRST _____

HOME ADDRESS _____
(Including City, State and Zip Code)

PHONE #_____ SOCIAL SECURTIY # _ _ _-_ _ -_ _ _ _

EMAIL ADDRESS _____

POSITION APPLIED FOR _____

Have you ever applied for employment or been employed by this Company? Yes ☐ No ☐
If yes, location, month and year: _____

Are you legally eligible for employment in the United States? Yes ☐ No ☐

Wage Expected: _____ per hour. Date Available: _____

Will you work overtime or shift work? Yes ☐ No ☐

EDUCATION:

School Name & Location of School	**Course of Study**	**Years Completed**	**Graduate?**
High School _____	_____	_____	_____
College _____	_____	Degree _____	_____

Vocational/Trade or
Apprentice Courses _____

_____

EMPLOYMENT HISTORY:
Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact employers, *the correct telephone numbers of past employers are critical.* You should include Military Service Assignmernts.

If hired by **RIVIERA ELECTRIC,** will you be working for any other employer as well?
Yes ☐ No ☐

MOST RECENT EMPLOYER: Are you currently working for this employer? Yes ☐ No ☐
If yes, may we contact them? Yes ☐ No ☐

_____ _____ _____
Company Name Address and City State Phone Number

Date Employed: From _____ To _____ Job Title _____ _____
Supervisor's Name

Duties: _____
_____

_____
Reason(s) for leaving

SECOND MOST RECENT EMPLOYER:

_____ _____ _____ _____
Company Name Address and City State Phone Number

Date Employed: From _____ To _____ Job Title _____ _____
Supervisor's Name

Duties: _____
_____
_____
Reason(s) for leaving

THIRD MOST RECENT EMPLOYER:

_____ _____ _____ _____
Company Name Address and City State Phone Number

Date Employed: From _____ To _____ Job Title _____ _____
Supervisor's Name

Duties: _____
_____
_____
Reason(s) for leaving

REFERENCES:
List at least two (2) persons familiar with your work and/or abilities. Do **not** include relatives.

Name	Address	Phone	Yrs. Known
_____	_____	_____	_____
_____	_____	_____	_____

JOB RELATED SKILLS AND REQUIREMENTS:

Do you have a valid driver's license? Driver's License # _____State___Type/Class____

Do you hold a Journeyman Electrician license or any other Electrician license with any state, county or municipality? If yes, please list the license number(s), date(s) of license(s) and location of issue: _____
_____

Are you willing to take a drug test, if required, as part of your application for employment?
Yes ☐ No ☐

If a favorable hiring decision is made, will you submit to a medical examination and/or answer a medical questionnaire? Yes ☐ No ☐

Have you been given a job description or had the requirements of the job explained to you?
Yes ☐ No ☐
Do you understand these requirements? Yes ☐ No ☐

Can you perform the requirements of this job with or without reasonable accommodation?
Yes ☐ No ☐

Have you had safety training for electrical work? Yes ☐ No ☐. If yes, please describe the training: _____
_____

OTHER QUALIFICATIONS:

Please list any other qualifications which you have and which you believe would be important for consideration for employment: _____
_____
_____

NOTICE TO APPLICANTS:

EMPLOYMENT WITH RIVIERA ELECTRIC IS CONSIDERED AT-WILL. EMPLOYEES HAVE THE RIGHT TO END THEIR WORK RELATIONSHIP WITH THE COMPANY, WITH OR WITHOUT ADVANCE NOTICE FOR ANY REASON. THE COMPANY HAS THE SAME RIGHT. THE LANGUAGE USED IN THIS APPLICATION AND ANY VERBAL STATEMENTS MADE BY MANAGEMENT ARE NOT INTENDED TO CONSTITUTE A CONTRACT OF EMPLOYMENT, EITHER EXPRESS OR IMPLIED, NOR ARE THEY A GUARANTEE OF EMPLOYMENT FOR A SPECIFIC DURATION. NO REPRESENTATIVE OF RIVIERA ELECTRIC, OTHER THAN THE PRESIDENT OF THE COMPANY, HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE.

RIVIERA ELECTRIC does not require a pre-employment medical examination, but **does** reserve the right to require drug testing and a medical examination **after** an offer of employment is made to an applicant. All offers of employment are conditioned upon the passing of a drug test for the purpose of detecting the illegal use of drugs. Also, if an employment offer is made, you will be asked to answer certain medical questions. Medical examinations and answers to medical inquiries will be maintained on separate forms, and will be treated as confidential medical records. An applicant will not be excluded from employment unless they have medical conditions

that prohibit their ability to perform the essential job functions of the position he or she desires with **RIVIERA ELECTRIC. RIVIERA ELECTRIC** will make reasonable accommodations to aid handicapped applicants or employees fulfill essential job functions. Written job descriptions are available and will be furnished to applicants upon request.

REPRESENTATIONS AND WAIVERS:
Read the following conditions. If you have any questions regarding the conditions, you should ask for an explanation or clarification from the employment interviewer. Signify your understanding and specific acceptance of each condition by your signature in the space provided at the end of the conditions.

I hereby authorize **RIVIERA ELECTRIC** to investigate any and all statements contained in this application. I hereby consent to **RIVIERA ELECTRIC** conducting any checks concerning my background which are deemed necessary, advisable, or helpful by **RIVIERA ELECTRIC,** except contacting my current employer, unless permission is granted above. I understand that if hired, I will receive a copy of **RIVIERA ELECTRIC** rules, regulations and policies, including its drug policy. I will read and understand the rules, regulations and policies; and I acknowledge that I will be required to abide by them. I understand that if hired, I will be required to submit to a drug test as part of this application procedure. I hereby consent to that drug test, agree to cooperate fully with that drug test, and waive any and all objections I might otherwise have to such drug testing. I understand that I may be required to submit to a medical examination, if I am advised of a favorable employment decision. I hereby consent to such medical examination, and will fully cooperate with any required examination. I understand and agree that if this application results in employment, my employment can be terminated with or without cause and with or without notice, at any time, at the option of either **RIVIERA ELECTRIC** or myself. I understand that no manager or representative of **RIVIERA ELECTRIC** has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing. I understand that due to the cyclical nature of the construction industry that **RIVIERA ELECTRIC** is not in a position to employ field personnel on a permanent basis.

I certify and guarantee that all statements made on this application are true and complete to the best of my knowledge and without mental reservations. I understand that falsification of this application may result in my not being considered for employment or, in the event I become employed by **RIVIERA ELECTRIC**, in my dismissal.

_____ _____

Signature of Applicant Printed Name of Applicant

_____

Date

VOLUNTARY DISCLOSURE AND STATEMENT:

SPECIAL EMPLOYMENT NOTICE TO DISABLED VETERANS, VIETNAM ERA VETERANS AND INDIVIDUALS WITH PHYSICAL OR MENTAL HANDICAPS:

Government contractors are subject to Section 402 of the Vietnam Era Veterans Re-adjustment Act of 1974 that required they take affirmative action to employ and advance in employment qualified disabled veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which requires government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals. Also, **RIVIERA ELECTRIC** complies with the Americans with Disabilities Act, and is willing to make reasonable accommodations to aid the employment of handicapped or disabled applicants.

Although you are not required to disclose information about physical or mental limitations that you believe will not interfere with you capability to do the job, if you want **RIVIERA ELECTRIC** to consider special arrangements to accommodate a physical or mental impairment, you may identify that impairment in the space provided below and suggest the kind of accommodation that you believe would be appropriate.

If you are a disabled veteran, or have a physical handicap, you are invited to volunteer this information. The purpose is to provide information regarding proper placement and appropriate accommodations to enable you to perform the job in a proper and safe manner. This information will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect any consideration you may receive for employment.

If you wish to be identified, please sign below.

Handicapped/Disabled Individual ☐ Disabled Veteran ☐ Vietnam Era Veteran ☐

Accommodations requested:

_____
_____
_____

_____	_____	_____
Signature of Applicant	Printed Name of Applicant	Date

Do not write below this line.

Interviewed by: _____

Hired: Yes ___ No ___ Date: _____

Position: _____ Start Date: _____

Salary/Wage: _____ To be reviewed in _____ months/year