



Applicants Name: _____

Employment Application

FIRE EXTINGUISHER SALES AND SERVICE

NOTICE: For Application to be accepted:

Application must be filled out entirely.

Tests must be completed inside our office with no assistance.

Job Description:

Primary: Employee will work in the powder shop discharging, refilling, disassembling, reassembling, and cleaning fire extinguishers and fire extinguisher valves. While working for Fire-Safe Extinguisher Service, Inc. employee must be able to work around powder, carry 50 lbs., lift 50 lbs. to eye level, maneuver by loading and unloading 250 lb. cylinders, walk and stand on cement for long periods of time (4-6 Hours), climb ladders and stairs. Employee will also use hand held power and gas tools to cut grass, perform everyday work routines and for minor office repairs at times. Employee will drive company vehicles to various locations at times to inspect fire extinguishers on locations, pick up orders, deliver orders, or to have maintenance and repairs performed on vehicles. These locations will include but are not limited to rock quarries, underground mines, power plants, machinery manufactures, and warehouses. Employee will fill out invoices and must be able to perform addition, subtraction, division, and multiplication of percentages.

Occasional: Employee may be called upon at times to perform office work such as filing, copying, scanning, and filling out paperwork.

Company Policy:

Fire-Safe Extinguisher Service, Inc. strives to set forth pure morals and values that will not be offensive to any employee or customer. While wearing company uniforms, working on company or customer property, or at any time representing Fire-Safe Extinguisher Service, Inc. Employees must adhere to appearance, attitude, dress, and language codes and use only designated smoking areas.

Pre-Application Questionnaire: *Mark the correct answers*

- 1) Are you able to legally work in the United States of America?
 Yes No
- 2) Are you 18 years of age or older?
 Yes No
- 3) Do you have a valid driver's licenses?
 Yes No
- 4) Are you currently taking illegal drugs of any form?
 Yes No
- 5) Have you been convicted of a Felony?
 Yes No
- 6) Have you been convicted of a Misdemeanor?
 Yes No

Personal and Driving Information:

Full Legal Name: _____ Preferred Name: _____
Present Address: _____ City: _____ State: AL Zip: _____
Phone Number Home: _____ - _____ - _____ Cell: _____ - _____ - _____ Facebook: _____ Instagram: _____
Do we have permission to check your Driver's License with our Insurance Company? Yes No
Driver's License Number: _____ State Issued _____ Restrictions if any _____
Expiration Date: ____/____/____ Date of Birth ____/____/____ Height: ____ ft. ____ in. Weight: _____ lbs.
Have your license ever been revoked (Pulled) or suspended? Yes No
In the past three years how many at fault vehicle accidents have you been in? _____
In the past three years how many tickets have you received? _____ What were the tickets for? _____
Do you have any unpaid tickets? Yes No

Employment Preference:

Positions desired: Any Open Office Shop Driver/Route Maintenance
Date available to start: ____/____/____ Salary desired: \$____.

Education Information:

High School Diploma GED Trade School Assoc. Degree Bachelor's Degree Master's Degree DR. Degree
High School Name: _____ Location: _____ Last Year Attended: _____
Subjects of Special Study: _____
College School Name: _____ Location: _____ Last Year Attended: _____
Subjects of Special Study: _____
Advanced School Name: _____ Location: _____ Last Year Attended: _____
Subjects of Special Study: _____
List any skills you have acquired that may be helpful to this company: _____

Former Employment:

Fill in all information regarding last three employers, including self-employment, starting with the most recent job first.

Employed By: _____ Job Title: _____ Phone Number: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Starting Date: ____/____/____ Weekly Salary \$ _____ Leaving Date: ____/____/____ Weekly Salary \$ _____

Description of Work You Performed: _____

Reason For Leaving: _____

Supervisor: _____ Title: _____ Contact Number: _____ - _____ - _____

Employed By: _____ Job Title: _____ Phone Number: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Starting Date: ____/____/____ Weekly Salary \$ _____ Leaving Date: ____/____/____ Weekly Salary \$ _____

Description of Work You Performed: _____

Reason For Leaving: _____

Supervisor: _____ Title: _____ Contact Number: _____ - _____ - _____

Employed By: _____ Job Title: _____ Phone Number: _____ - _____ - _____

Address: _____ City: _____ State: _____ Zip: _____

Starting Date: ____/____/____ Weekly Salary \$ _____ Leaving Date: ____/____/____ Weekly Salary \$ _____

Description of Work You Performed: _____

Reason For Leaving: _____

Supervisor: _____ Title: _____ Contact Number: _____ - _____ - _____

Service Record:

Branch: _____ Rank: _____ Recruited: ____/____/____ Discharged: ____/____/____

Honorable Discharge? Yes No Explain: _____

Contact Person/Office: _____ Rank: _____ Contact Number: _____ - _____ - _____

We would like to say "Thank You" to anyone who has served in any capacity of the United States Government, Military, Federal or State Law enforcement or First Responders. You make us a better and safer nation. -Fire-Safe Extinguisher Service, Inc. Management