



120 S Market Street, Suite #3
Elizabethtown, PA 17022
717-367-8112

www.elizabethtownheatingandcooling.com

HVAC Employment Application

(Please Print Clearly – complete all pages)

Position Applying for: _____ Date: _____

PERSONAL INFORMATION

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

If you've lived at your current address less than 5 years, what was your prior address?

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

Social Security Number: _____ - _____ - _____

Email Address: (if available) _____

How did you hear about Elizabethtown Heating and Cooling? _____

EMPLOYMENT INFORMATION

Citizenship/Work Status: ☐ U.S. Citizen ☐ Green Card Holder ☐ U.S. Work Permit/Visa

☐ Canadian Citizen ☐ Canadian Work Permit/Visa

Current Employer: (if any) _____

Level of Experience relevant to the position you are applying for:

☐ Entry Level (less than 2 years) ☐ Mid-Career (2-4 years) ☐ Tenured Career (5 plus years)

Employment Type Desired: ☐ FULL-TIME ☐ PART-TIME

Desired Compensation: \$ _____ ☐ Hourly ☐ Annual

Other Compensation Desired: _____

When are you available to start work? _____

EDUCATION

Type of School	Name of School	Location	# of Years Completed	Major & Degree
High School				
College/University				
Bus. or Trade School				
Professional School				

CRIMINAL HISTORY

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR (except any minor traffic violations)? ☐ No ☐ Yes

If yes, please explain and attach any relevant documentation. _____

DRIVERS LICENSE INFORMATION

DO YOU HAVE A VALID DRIVERS LICENSE? ☐ Yes ☐ No

Do you have reliable transportation to work (please be specific)? _____

Driver's License Number: _____ State of Issue: _____ Exp. Date: _____

Do you have a clean driving record? ☐ Yes ☐ No

If not, explain: _____

Have you ever been convicted of DUI? ☐ Yes ☐ No

MILITARY SERVICE

HAVE YOU EVER BEEN IN THE ARMED FORCES? ☐ Yes ☐ No Branch: _____

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? ☐ Yes ☐ No

Specialty _____ Date Entered _____ Discharge Date _____

Were you honorably discharged? ☐ Yes ☐ No If no, explain: _____

Work Experience

Please list your work experience for the past 5 years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary. Attach resume if applicable.

Name & Address of Employer:	Name of last supervisor	Employment Dates	Pay or Salary
Phone Number:	Your Last Job Title:	From: To:	Start: Final:
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name & Address of Employer:	Name of last supervisor	Employment Dates	Pay or Salary
Phone Number:	Your Last Job Title:	From: To:	Start: Final:
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name & Address of Employer:	Name of last supervisor	Employment Dates	Pay or Salary
Phone Number:	Your Last Job Title:	From: To:	Start: Final:
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name & Address of Employer:	Name of last supervisor	Employment Dates	Pay or Salary
Phone Number:	Your Last Job Title:	From: To:	Start: Final:
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Name & Address of Employer:	Name of last supervisor	Employment Dates	Pay or Salary
Phone Number:	Your Last Job Title:	From: To:	Start: Final:
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

HVAC/R Industry Skills (select all that apply)

What Size of HVAC/R equipment have you worked with? (select ALL that apply)

☐ 1-5 Tons ☐ 5-20 Tons ☐ 20-50 Tons ☐ 50-100 Tons ☐ 100+ Tons

<input type="checkbox"/> American Standard	<input type="checkbox"/> Samsung	<input type="checkbox"/> Frigidaire	<input type="checkbox"/> Bryant	<input type="checkbox"/> Carrier
<input type="checkbox"/> Coleman	<input type="checkbox"/> Nordyne	<input type="checkbox"/> Lennox	<input type="checkbox"/> Gibson	<input type="checkbox"/> Daikin
<input type="checkbox"/> Goodman	<input type="checkbox"/> Miller	<input type="checkbox"/> United	<input type="checkbox"/> Johnson Controls	<input type="checkbox"/> Honeywell
<input type="checkbox"/> Amana	<input type="checkbox"/> TempStar	<input type="checkbox"/> Fujitsu	<input type="checkbox"/> Luxaire	<input type="checkbox"/> Kelvinator
<input type="checkbox"/> Maytag	<input type="checkbox"/> Reznor	<input type="checkbox"/> Toshiba	<input type="checkbox"/> Philco	<input type="checkbox"/> Rheem
<input type="checkbox"/> Ruud	<input type="checkbox"/> LG	<input type="checkbox"/> York	<input type="checkbox"/> Siemens	<input type="checkbox"/> Trane
<input type="checkbox"/> Westinghouse	<input type="checkbox"/> Sanyo	<input type="checkbox"/> Vogt		

What types of Parts and Accessories have you worked with? (Select ALL that apply)

<input type="checkbox"/> Coils	<input type="checkbox"/> Condensers	<input type="checkbox"/> Dampers	<input type="checkbox"/> Diffusers	<input type="checkbox"/> Duct Work
<input type="checkbox"/> Electric Motors	<input type="checkbox"/> Fans	<input type="checkbox"/> Grills	<input type="checkbox"/> HVAC Parts	<input type="checkbox"/> Registers
<input type="checkbox"/> Sheet Metal	<input type="checkbox"/> Sound Attenuators	<input type="checkbox"/> Vacuum Pumps	<input type="checkbox"/> Valves	

HVAC/R Industry Skills Continued

What types of Equipment or Systems have you worked with? (Select ALL that apply)

<input type="checkbox"/> Split Systems	<input type="checkbox"/> Rooftop Units	<input type="checkbox"/> In-Floor	<input type="checkbox"/> Air Dist. Equipment
<input type="checkbox"/> Exhaust Systems	<input type="checkbox"/> Dry Systems	<input type="checkbox"/> Water Heaters	<input type="checkbox"/> Ventilation
<input type="checkbox"/> Oil Furnaces	<input type="checkbox"/> Humidification	<input type="checkbox"/> Air Handlers	<input type="checkbox"/> Dehumidification
<input type="checkbox"/> Gas Furnaces	<input type="checkbox"/> Gas Boilers	<input type="checkbox"/> Forced Air Systems	<input type="checkbox"/> Ground Source Heat Pumps
<input type="checkbox"/> Heat Pumps	<input type="checkbox"/> Oil Boilers	<input type="checkbox"/> Propane	<input type="checkbox"/> Absorbtion Systems
<input type="checkbox"/> Steam	<input type="checkbox"/> Portable HVAC	<input type="checkbox"/> Radiant Heating	

What Job Functions have you performed? (select ALL that apply)

<input type="checkbox"/> Activity Reporting	<input type="checkbox"/> Installation	<input type="checkbox"/> Manager	<input type="checkbox"/> Installation – New Homes
<input type="checkbox"/> Troubleshooting	<input type="checkbox"/> Repair/Service	<input type="checkbox"/> Field Supervisor	<input type="checkbox"/> Operations Manager
<input type="checkbox"/> Drywall Repair	<input type="checkbox"/> Estimator	<input type="checkbox"/> Foreman	<input type="checkbox"/> Preventative Maintenance
<input type="checkbox"/> Electrical	<input type="checkbox"/> Technician	<input type="checkbox"/> Client Interaction	<input type="checkbox"/> Purchasing
<input type="checkbox"/> Carpentry	<input type="checkbox"/> Drafting	<input type="checkbox"/> Driving	<input type="checkbox"/> Contract Negotiations
<input type="checkbox"/> Brazing	<input type="checkbox"/> Fabrication	<input type="checkbox"/> Inventory Control	<input type="checkbox"/> Contract/Proposal Prep.
<input type="checkbox"/> Assembling	<input type="checkbox"/> Customer Service	<input type="checkbox"/> NATE Cert	<input type="checkbox"/> General Construction
<input type="checkbox"/> Maintenance		<input type="checkbox"/> EPA-CFC Cert.	<input type="checkbox"/> Service Agreements

What Computer related experience do you have? (select ALL that apply)

<input type="checkbox"/> MS Office	<input type="checkbox"/> ACT	<input type="checkbox"/> Echelon	<input type="checkbox"/> Lon-Works	<input type="checkbox"/> SalesLogix
<input type="checkbox"/> MS PowerPoint	<input type="checkbox"/> Approach	<input type="checkbox"/> Energy Pro	<input type="checkbox"/> Sharkware	<input type="checkbox"/> Trane Duct/Pipe Designer
<input type="checkbox"/> MS Word	<input type="checkbox"/> AutoCad	<input type="checkbox"/> Siebel	<input type="checkbox"/> Microstation	<input type="checkbox"/> Estimation (software)
<input type="checkbox"/> MS Access	<input type="checkbox"/> Derby	<input type="checkbox"/> Goldmine	<input type="checkbox"/> QuickPen	<input type="checkbox"/> Lon-Based Cicron
<input type="checkbox"/> MS Excel	<input type="checkbox"/> Ecco Pro	<input type="checkbox"/> Load/Trace	<input type="checkbox"/> WinSales	<input type="checkbox"/> QuickBooks

What Certifications & Licenses do you have? (select ALL that apply)

<input type="checkbox"/> Certified Energy Manager	<input type="checkbox"/> EPA 608 Type III	<input type="checkbox"/> HVAC Excellence -
<input type="checkbox"/> Master Plumber License	<input type="checkbox"/> EPA 608 Type II	<input type="checkbox"/> Commercial A/C
<input type="checkbox"/> Master HVAC License	<input type="checkbox"/> EPA 608 Type I	<input type="checkbox"/> Gas Heat
<input type="checkbox"/> Registered Professional Engineer	<input type="checkbox"/> EPA 608 Universal	<input type="checkbox"/> Hydronics I
<input type="checkbox"/> Journeyman Plumber License	<input type="checkbox"/> NATE – Air Distribution	<input type="checkbox"/> Commercial Refrigeration
<input type="checkbox"/> Journeyman HVAC License	<input type="checkbox"/> NATE – Oil Heating	<input type="checkbox"/> Geothermal
<input type="checkbox"/> ICE – Commercial Refridgeration	<input type="checkbox"/> NATE – A/C	<input type="checkbox"/> Hydronics II
<input type="checkbox"/> ICE – Light Commerical A/C & Heating	<input type="checkbox"/> NATE – Heat Pumps	<input type="checkbox"/> A/C
<input type="checkbox"/> ICE – Residential A/C & Heating	<input type="checkbox"/> NATE – Gas Heat	<input type="checkbox"/> Electrical Heat
		<input type="checkbox"/> Oil Heat
		<input type="checkbox"/> Heat Pumps

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Professional References: Please list 3-4 people you have worked with that can attest to your ON THE JOB EXPERIENCE and PERFORMANCE.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Telephone _(____)_____	Telephone _(____)_____
How many years known? _____	How many years known? _____

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Telephone _(____)_____	Telephone _(____)_____
How many years known? _____	How many years known? _____

Did you complete this application yourself? ☐ Yes ☐ No

If not, who did? _____

AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with Elizabethtown Heating and Cooling creates an actual or implied contract of employment. I understand that, if I accept employment with Elizabethtown Heating and Cooling, it will be on an at-will basis. This means that either Elizabethtown Heating and Cooling or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by Elizabethtown Heating and Cooling. I release Elizabethtown Heating and Cooling, and its employees plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize Elizabethtown Heating and Cooling to investigate information concerning my education, employment experiences, criminal record and all other aspects of my background relevant to my proposed employment. I release Elizabethtown Heating and Cooling and its employees from all liability arising from such investigation.

Signature of applicant: _____

Date: _____

Print Name: _____

Elizabethtown Heating and Cooling is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Elizabethtown Heating and Cooling depends solely on your qualifications.