



# ELECTRICAL EMPLOYMENT APPLICATION

(Please Print Clearly – complete all 6 pages)

Position(s) Applying for:

Application Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Personal Information

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Work Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ ext. \_\_\_\_ Cell Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_

Email Address: (if available) \_\_\_\_\_

How did you hear about our company? \_\_\_\_\_

## 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) \_\_\_\_\_

Years of Work Experience directly related to the position you are applying for: \_\_\_\_\_

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 DRIVER'S LICENSE?  Yes  No

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

Driver's license number: \_\_\_\_\_ State of Issue: \_\_\_\_\_

Operator  Commercial (CDL)  Chauffeur Do you have a clean driving record?  Yes  No

List any Moving Violations and/or Accidents from the last 3 years: \_\_\_\_\_  
 \_\_\_\_\_

### Military Service

HAVE YOU EVER BEEN IN THE ARMED FORCES?  Yes  No Branch: \_\_\_\_\_

ARE YOU CURRENTLY A MEMBER OF THE NATIONAL GUARD or RESERVES?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_ Type of Discharge \_\_\_\_\_

### Work Experience

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

Name of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From	Start
		To	Final
Phone:	Your last job title		
Specific reason for leaving			
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 of employer:	Name of last supervisor	Employment dates	Pay or salary
Address with city/state/zip:		From	Start
		To	Final
Phone:	Your last job title		
Specific reason for leaving			
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 of employer:  Address with city/state/zip:  Phone:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Specific reason for leaving			
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 of employer:  Address with city/state/zip:  Phone:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Specific reason for leaving			
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			

**ELECTRICAL INDUSTRY SKILLS SECTION INSTRUCTIONS:** ONLY select the specific industry skills that you consider yourself to be very knowledgeable about, with a high level of competency.

### Electrical Industry Skills

What types of systems have you worked with? (Select all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Building Management                          | <input type="checkbox"/> High Voltage (601V and higher)     | <input type="checkbox"/> PLC Controllers / Troubleshooting |
| <input type="checkbox"/> Bus ducts                                    | <input type="checkbox"/> Hydraulic Systems                  | <input type="checkbox"/> Pneumatic Systems                 |
| <input type="checkbox"/> CCTV / Data                                  | <input type="checkbox"/> IT / Server Rooms                  | <input type="checkbox"/> Power Distribution / Switchgear   |
| <input type="checkbox"/> Climate Control and HVAC                     | <input type="checkbox"/> Low Voltage (600V and less)        | <input type="checkbox"/> Security Systems                  |
| <input type="checkbox"/> DC Systems                                   | <input type="checkbox"/> Lighting Centers / Fixtures        | <input type="checkbox"/> Signaling Systems                 |
| <input type="checkbox"/> Elevators / Conveyors                        | <input type="checkbox"/> Manufacturing Equipment            | <input type="checkbox"/> Solid State Devices               |
| <input type="checkbox"/> Emergency Critical Load Distribution Systems | <input type="checkbox"/> Mechanical Systems                 | <input type="checkbox"/> Street & Site Lighting            |
| <input type="checkbox"/> Fire Alarm Systems                           | <input type="checkbox"/> Motor Control Centers / VFD Drives | <input type="checkbox"/> Transformers                      |
| <input type="checkbox"/> Generators and Transfer Switches             | <input type="checkbox"/> Overhead Cranes                    | <input type="checkbox"/> Voice / Telecommunication         |

What types of wiring methods have you worked with? (Select all that apply)

- |   |  |                                      |                                      |
|---|--|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> EMT / Rigid        | <input type="checkbox"/> High Voltage Terminations | <input type="checkbox"/> Cat5 / Cat6 | <input type="checkbox"/> Fiber Optic |
| <input type="checkbox"/> Hazardous Location | <input type="checkbox"/> Cable Tray                | <input type="checkbox"/> Coax        |                                      |

What Applications do you have experience with? (Select all that apply)

- |   |  |  |   |   |
|---|--|--|---|---|
| <input type="checkbox"/> Aircraft / Airport | <input type="checkbox"/> Dynamometers        | <input type="checkbox"/> Hospitals / Medical     | <input type="checkbox"/> Off-Shore / Marine | <input type="checkbox"/> Research / Testing     |
| <input type="checkbox"/> Clean Rooms        | <input type="checkbox"/> Government Projects | <input type="checkbox"/> Manufacturing Processes | <input type="checkbox"/> Raised Floors      | <input type="checkbox"/> Schools / Institutions |

## Electrical Industry Skills Continued

What Job Functions have you performed? (Select all that apply)

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> Activity Reporting               | <input type="checkbox"/> Drywall Repair                  | <input type="checkbox"/> NETA                         | <input type="checkbox"/> Sales Training Development         |
| <input type="checkbox"/> Activity Tracking                | <input type="checkbox"/> Electrical Compatibility        | <input type="checkbox"/> OEM                          | <input type="checkbox"/> Service                            |
| <input type="checkbox"/> Advertising                      | <input type="checkbox"/> Engineer/PE                     | <input type="checkbox"/> Operations Manager           | <input type="checkbox"/> Service Agreements                 |
| <input type="checkbox"/> Air Hammer Operation             | <input type="checkbox"/> Estimator                       | <input type="checkbox"/> Schematics                   | <input type="checkbox"/> Shipping/Receiving                 |
| <input type="checkbox"/> ANSI                             | <input type="checkbox"/> Expense Reports                 | <input type="checkbox"/> Planning                     | <input type="checkbox"/> Sizing Wires / Cables              |
| <input type="checkbox"/> Appliance Installation           | <input type="checkbox"/> Fabricating                     | <input type="checkbox"/> Policy/Procedure Development | <input type="checkbox"/> Soldering                          |
| <input type="checkbox"/> Assembling                       | <input type="checkbox"/> Facility Manager                | <input type="checkbox"/> Power Tools                  | <input type="checkbox"/> Staffing                           |
| <input type="checkbox"/> Budgeting                        | <input type="checkbox"/> Field Supervisor                | <input type="checkbox"/> Prepare Financial Reports    | <input type="checkbox"/> Strategic Alliances                |
| <input type="checkbox"/> Building Codes                   | <input type="checkbox"/> Forecasting                     | <input type="checkbox"/> Presentation Preparation     | <input type="checkbox"/> Superintendent                     |
| <input type="checkbox"/> Business Development             | <input type="checkbox"/> Foreman                         | <input type="checkbox"/> Preventative Maintenance     | <input type="checkbox"/> Supervision                        |
| <input type="checkbox"/> Carpentry                        | <input type="checkbox"/> General Construction            | <input type="checkbox"/> Project Management           | <input type="checkbox"/> Take-offs                          |
| <input type="checkbox"/> Change Orders                    | <input type="checkbox"/> General Manager                 | <input type="checkbox"/> Project Scheduling           | <input type="checkbox"/> Team Building                      |
| <input type="checkbox"/> Client Interaction               | <input type="checkbox"/> Goal Setting                    | <input type="checkbox"/> Proposal Development         | <input type="checkbox"/> Territory Management               |
| <input type="checkbox"/> Client/Account Management        | <input type="checkbox"/> IEEE                            | <input type="checkbox"/> Prospecting/Lead Generation  | <input type="checkbox"/> Test Meter Operation               |
| <input type="checkbox"/> Computer Literate                | <input type="checkbox"/> Installation                    | <input type="checkbox"/> Punch List                   | <input type="checkbox"/> Tracing Short Circuits             |
| <input type="checkbox"/> Conduit Benders                  | <input type="checkbox"/> Installation - New Construction | <input type="checkbox"/> Purchase Orders              | <input type="checkbox"/> Trainer                            |
| <input type="checkbox"/> Contract Negotiations            | <input type="checkbox"/> Instructor                      | <input type="checkbox"/> Purchasing                   | <input type="checkbox"/> Troubleshooting                    |
| <input type="checkbox"/> Contract/Proposal Preparation    | <input type="checkbox"/> International Equipment         | <input type="checkbox"/> Quality Assurance/Control    | <input type="checkbox"/> Using Specialty Metering Equipment |
| <input type="checkbox"/> Conventions/Trade Shows          | <input type="checkbox"/> Inventory Control               | <input type="checkbox"/> Read Schematics              | <input type="checkbox"/> Vendor Coordination                |
| <input type="checkbox"/> Customer Service                 | <input type="checkbox"/> Journeyman                      | <input type="checkbox"/> Report Generation            | <input type="checkbox"/> Wiring-Testing                     |
| <input type="checkbox"/> Data Entry                       | <input type="checkbox"/> Layout                          | <input type="checkbox"/> Rough-In                     |   |
| <input type="checkbox"/> Department Forecasting           | <input type="checkbox"/> Lead Generation                 | <input type="checkbox"/> Run Wiring Underground       |   |
| <input type="checkbox"/> Design/Build                     | <input type="checkbox"/> Lead Management                 | <input type="checkbox"/> Safety                       |   |
| <input type="checkbox"/> Develop Relationships/ Alliances | <input type="checkbox"/> Leadership                      | <input type="checkbox"/> MS Word                      |   |
| <input type="checkbox"/> Dispatching                      | <input type="checkbox"/> Maintenance                     | <input type="checkbox"/> QuickPen                     |   |
| <input type="checkbox"/> Drafting                         | <input type="checkbox"/> NEC Standards                   |   |   |
|   | <input type="checkbox"/> Negotiate Contracts             |   |   |

What Computer related experience do you have? (Select all that apply)

- |                                   |  |  |                                     |
|-----------------------------------|--|--|-------------------------------------|
| <input type="checkbox"/> ACT      | <input type="checkbox"/> Estimation (software) | <input type="checkbox"/> MS Excel      | <input type="checkbox"/> SalesLogix |
| <input type="checkbox"/> Approach | <input type="checkbox"/> Goldmine              | <input type="checkbox"/> MS Office     | <input type="checkbox"/> WinSales   |
| <input type="checkbox"/> AutoCad  | <input type="checkbox"/> MS Access             | <input type="checkbox"/> MS PowerPoint |                                     |

## Certifications & Licenses

What Certifications & Licenses do you have? (Select all that apply)

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Apprentice Electrician License | <input type="checkbox"/> Master Electrician License | <input type="checkbox"/> Registered Professional Engineer |
| <input type="checkbox"/> Journeyman Electrician License |   |   |

**Include State and License Numbers** for any licenses selected above, if applicable: \_\_\_\_\_

\_\_\_\_\_

Other Licenses & Certifications held: \_\_\_\_\_



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**AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)**

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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 MSC Electrical creates an actual or implied contract of employment. I understand that, if I accept employment with MSC Electrical, it will be on an at-will basis. This means that either MSC ELECTRICAL 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 MSC Electrical. I release MSC Electrical, 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 MSC ELECTRICAL to investigate information concerning my education, licensing, certifications, driving record, criminal history, employment experiences and all other aspects of my background relevant to my proposed employment. I release MSC Electrical and its employees from all liability arising from such investigation.

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

Print Name: \_\_\_\_\_

MSC ELECTRICAL is an equal employment 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 MSC Electrical depends solely on your qualifications.



**MSC ELECTRICAL**  
5407 Gratiot Avenue Saint Clair, Michigan 48079  
sales@mscelectrical.com 810-77POWER 810-777-6937