

# Employment Application



1910 130th St NW  
Aberdeen, SD 57401  
605-225-9822  
climatecontrolprofessionals.com  
info@climatecontrolprofessionals.com

Applicant's Name (Last, First, Middle Initial):

Application Date:

**Please Read Before Beginning:** The information requested on this application will be used to determine your qualifications for employment. All requested information must be provided. Answer completely and accurately.

Do not leave blanks. If a question does not apply or you do not have information, write "N/A" or "Not Applicable."

Once submitted this document will be kept confidential and remain the property of Climate Control.

Climate Control is committed to a policy of equal employment opportunity. We will not discriminate on the basis of race, creed, color, sex, sexual orientation, age, marital status, national origin, citizenship, ancestry, physical or mental disability, veteran status, or any other legally protected basis.

# About Climate Control

Climate Control was started in 2000 by Cam Schock. Climate Control targets the residential and light commercial service and replacement markets. The company does work with several custom home builders and will perform new installations for these companies.



Climate Control is an established contracting company with an excellent reputation for performance and as a place to work. The company cares about employees, and insists that employees care about customers.

Climate Control's office hours are 8:00 a.m. to 4:30 p.m., Monday through Friday. Service personnel are expected to work in excess of 40 hours during periods of high demand and to remain on call from time-to-time. Employees are compensated accordingly.

New hires must provide verification of the right to work in the United States. The company performs background checks on all new hires. New employees work on probation for 90 days.

## Benefits

Climate Control offers very competitive pay and benefits. The benefits include:

- Paid Holidays (7 per year)
- Paid Time Off (1 hour 40 minutes per pay period, approximately 40 hours per year, up to 120 hours)
- Social Security & Medicare
- Paid Retirement
- Workman's Compensation Insurance
- Health & Vision Insurance
- Life & AD&D Insurance
- Dental Insurance
- Employment Referral Bonus
- Field Service Vehicle Usage
- Field Service Safety Awards
- Field Service Tool Allowance
- Field Service Uniforms
- Company Training
- External Training

# Personal Data

\_\_\_\_\_

Date

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle Name

\_\_\_\_\_

Last Name

\_\_\_\_\_

Social Security Number

\_\_\_\_\_

Street Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip

Are you 18 years old or over?

☐

Yes

☐

No

If you are under 18, do you have a work permit?

☐

Yes

☐

No

\_\_\_\_\_

Home Phone

\_\_\_\_\_

Mobile Phone

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

Have you worked for us before?

☐

Yes

☐

No

\_\_\_\_\_

If Yes, when?

\_\_\_\_\_

If Yes, under what name?

\_\_\_\_\_

If Yes, what position did you hold?

# Position Desired

Type of work you are applying for:

☐

Customer Service  
Rep

☐

Dispatcher

☐

Office

☐

Sales

☐

Installation  
Professional

☐

Maintenance  
Professional

☐

Service  
Professional

☐

Other (Describe) \_\_\_\_\_

Type of Schedule:

☐

Full-Time

☐

Part-Time

Salary Desired: \_\_\_\_\_

Date Available: \_\_\_\_\_

How did you select Climate Control (Please name any employee, advertisement, etc.)?

If you receive a conditional offer of employment, can you provide verification of your identity and legal right to work in the United States?

☐

Yes

☐

No

\_\_\_\_\_

If you are not a U.S. citizen, what is your visa status?

Have you ever been convicted of a felony (Do not identify convictions that have been sealed, expunged, dismissed, pardoned or otherwise eradicated)?

☐

Yes

☐

No

Do you have any physical limitations that may inhibit your ability to perform the tasks required of the position you are applying for? Describe.

☐

Yes

☐

No

Are you currently on 'lay off' status and subject to recall?

☐

Yes

☐

No

# Education

School Name	Location	Years Attended	Years Completed (Circle)	Diploma or Degree (Circle)	Major Field of Study
			High School 9 10 11 12	Y N	
			Trade School 1 2 3 4	Y N	
			College 1 2 3 4	Y N	
			Grad School 1 2 3 4	Y N	

Post Graduate Training or Certifications	Date	Description

# Technical/Computer Skills

Office/Software	Service	Install	HVAC	Job Skills
<input type="checkbox"/> Microsoft Publisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Brazing
<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Air Distribution	<input type="checkbox"/> Welding
<input type="checkbox"/> Microsoft Access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Air to Air Heat Pump	<input type="checkbox"/> Electrical
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Gas Warm Air Heating	<input type="checkbox"/> Sheet Metal
<input type="checkbox"/> Quick Books Pro	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Oil Warm Air Heating	<input type="checkbox"/> Carpentry
<input type="checkbox"/> Adobe Photoshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Hydronic Gas Heating	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Switchboard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Hydronic Oil Heating	
<input type="checkbox"/> 10 Key	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Light Refrigeration	<input type="checkbox"/> HVAC Contractor
<input type="checkbox"/> Bookkeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Commercial Refrigeration	<input type="checkbox"/> Plumbing Journeyman
<input type="checkbox"/> Load Calculation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Chillers	<input type="checkbox"/> Master Plumber
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Control Systems	<input type="checkbox"/> Electrician Journeyman/Master

## Licenses

# Work History

Employer (Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	If still employed by this company, may we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address
Telephone Number, Including Area Code			
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

Employer (Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	If still employed by this company, may we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address
Telephone Number, Including Area Code			
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

Employer (Most Recent)		Job Title	Supervisor
Employed From (Mo/Yr)	Employed To (Mo/Yr)	If still employed by this company, may we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address
Telephone Number, Including Area Code			
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed	

# Work History Continued

Employer (Most Recent)		Job Title		Supervisor
		If still employed by this company, may we contact your supervisor?		
Employed From (Mo/Yr)	Employed To (Mo/Yr)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address	
Telephone Number, Including Area Code				
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed		

Employer (Most Recent)		Job Title		Supervisor
		If still employed by this company, may we contact your supervisor?		
Employed From (Mo/Yr)	Employed To (Mo/Yr)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address	
Telephone Number, Including Area Code				
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed		

Employer (Most Recent)		Job Title		Supervisor
		If still employed by this company, may we contact your supervisor?		
Employed From (Mo/Yr)	Employed To (Mo/Yr)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Employer Address	
Telephone Number, Including Area Code				
Starting Pay Rate/Salary	Ending Pay Rate/Salary	Job Duties/Work Performed		

If you need additional space, please use another sheet of paper.

# References

Please list the names and contact information of two business or professional references that we may contact. Do not list relatives as references.

1

Name

Phone Number, Including Area Code

Address

How Acquainted

2

Name

Phone Number, Including Area Code

Address

How Acquainted

Please list the names and contact information of two previous co-workers that we may contact.

1

Name

Phone Number, Including Area Code

Address

How Acquainted

2

Name

Phone Number, Including Area Code

Address

How Acquainted

# Emergency Contact

Name

Relationship

Address

Phone Number, Including Area Code

City

State

Zip

# Driving Information

All Applicants should complete this section.

Do you have a current  
driver's license?

☐ Yes ☐ No

State

License Number

Expiration Date

Has your driver's license ever  
been suspended for any  
reason?

☐ Yes ☐ No

If Yes, please explain

Do you have personal  
automobile Insurance?

☐ Yes ☐ No

Insurance Company

Has your personal  
automobile insurance ever  
been cancelled?

☐ Yes ☐ No

If Yes, please explain

List all moving traffic violations from the past five years.

Offense

Date

Location

Offense

Date

Location

Offense

Date

Location

Offense

Date

Location

Offense

Date

Location

# Work Availability

Do you have any  
objections to working  
overtime?

☐ Yes ☐ No

Do you have any  
objections to  
being on call?

☐ Yes ☐ No

Would you be able to  
work overtime with little  
or no notice?

☐ Yes ☐ No

Can you work on  
Saturday?

☐ Yes ☐ No

Can you work on  
Sunday?

☐ Yes ☐ No



# Additional Information

Please describe any additional training, qualifications, or other factors we should be aware of.

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How do you feel you can contribute to the Climate Control team?

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Why do you want to work at Climate Control?

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# Applicant's Statement

By signing this application, I agree to the following:

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Acknowledge By  
Initializing

I declare that the information I have provided in this employment application is complete and truthful to the best of my knowledge. I acknowledge and agree that omitting information or providing false information on this application would be grounds for refusal to hire or termination, if hired.

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Acknowledge By  
Initializing

I understand that nothing in this employment application, nor anything said to me by any representative of Climate Control during the interview process or afterwards shall constitute a contract of employment or other employment rights.

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Acknowledge By  
Initializing

I authorize Climate Control to investigate and validate the information provided on this application and give permission to any people or organizations listed on this application to provide Climate Control with any and all information regarding prior employment, education, and other pertinent information they might have, whether personal or otherwise. I release all parties from any liability for damage that might result from the utilization of this information.

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Acknowledge By  
Initializing

If hired, I authorize Climate Control to provide my employment record and other information surrounding my employment to prospective employers, government agencies, or other parties with an interest that Climate Control at its sole discretion deems appropriate.

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Acknowledge By  
Initializing

If I am employed by Climate Control, I agree to conform to Climate Control rules, regulations, and policies as described in the employee handbook and other documents. I understand that these rules and regulations may be modified, discarded, or amended by Climate Control, at any time, without prior notice, at the sole discretion of Climate Control management. I agree to conform to any changes in Climate Control rules, regulations, and policies.

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Acknowledge By  
Initializing

If employed by Climate Control, I acknowledge that my employment is completely "at will." My employment with Climate Control may be terminated with or without cause, at any time, by me or by Climate Control.

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Acknowledge By  
Initializing

I acknowledge that no representative or employee of Climate Control has the authority to create or enter into an agreement for employment with me for a set time period or assurance of any benefits beyond the terms and conditions described in the employee handbook.

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Acknowledge By  
Initializing

I agree to a physical examination and drug testing before the start of employment or following employment, at the discretion of Climate Control.

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Signature

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Date