



New Application Packet



DBA

Bowlin Communication, LLC • Bowlin Energy, LLC • Bowlin Services, LLC • PowerPlus Electric

1220 Chandler Drive
Walton, KY 41094

APPLICATION FOR EMPLOYMENT

Bowlin Group LLC is an equal Employment Opportunity Employer. Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability or handicap, or any other legally protected status. All qualified applicants will be given equal opportunity and selection decisions are based solely on job-related factors.

PERSONAL INFORMATION Use the additional space on the back of this form, if needed. Please Print All Information.

Name (Full – Last, First, MI)		What date are you available to start work?	
Street Address:		City	State Zip
Home Phone	Other Phone	Have you ever filed an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, give date _____	
Have you previously been employed by our company? <input type="checkbox"/> Yes <input type="checkbox"/> No When?		Do you have any friends or relatives working here? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, please list _____	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you provide proof of eligibility to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of eligibility will be required before you can be employed)		Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable	
Position applied for:	Desired Wages/Salary:	Are you willing to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> 2 nd Shift <input type="checkbox"/> Weekends <input type="checkbox"/> Overtime	

Education

Elementary School	Circle grade completed 1 2 3 4 5 6 7 8							
City/State								
High School	Circle grade completed 1 2 3 4				Did you graduate?			
City/State								
College			Type Degree Received Or Expected		Average Grade	Course Major/Field		
City/State								
College			Type Degree Received Or Expected		Average Grade	Course Major/Field		
City/State								

Other job-related, educational institutions, licenses, certifications, any specialized training, apprenticeship, skills or any additional information you feel may be helpful to us in considering your application.

Do you have a reliable means of transportation to and from work? _____

EMPLOYMENT HISTORY (List below last employers, starting with the most recent one first)

Present or Last Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor	Title and Department of Supervisor	Phone Number of Supervisor	If currently employed, may we contact your supervisor?

Next Previous Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor	Title and Department of Supervisor	Phone Number of Supervisor	

Next Previous Position	Name of Company	From Mo/Yr	To Mo/Yr
Street Address:		City	State Zip
Duties:		Reason for Leaving:	
Starting Annual Salary	Final Annual Salary	Bonus	Commission
Name of Supervisor	Title and Department of Supervisor	Phone Number of Supervisor	

If currently employed, may we contact your present employer? ____ Yes ____ No

References

List at least three responsible adults who have knowledge of your work ethic, experience, and ability.
(Do not include relatives)

Name	Address	Telephone No.	Occupation

Are you currently on lay-off and subject to recall? ____ Yes ____ No

Are you bound by any non-compete agreements with your current or former employer(s) ____ Yes ____ No If yes, attach a copy of agreement.

Do you have any commitments or other agreements with another employer that might affect your employment with Bowlin Group LLC? ____ Yes ____ No

If yes, please explain: _____

If applying for a position that requires driving, do you have a valid driver's license? ____ Yes ____ No

Please list date and description of all chargeable accidents:

Driver's license # _____ State _____ Class _____ (CDL) ____ Yes ____ No

Please describe any experience or special training received in the military or government service related to the position for which you are applying:

If applying for a clerical position, what business equipment can you operate? (For example, computers, copiers, etc.)

If applying for a clerical/administrative/professional position that requires speed and accuracy on the keyboard, indicate your speed:

Words/Minute:

List the specific skills, qualifications you possess related to the position for which you are applying:

In what computer software programs are you proficient? [Name the package(s).]

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING

JOB APPLICANT'S AGREEMENT AND CERTIFICATION

- In consideration of my employment, I agree to conform to the policies and procedures of the company. I understand that in accepting this application, the company is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered. Furthermore, if employed, I understand that I am employed at will and that my employment and compensation can be terminated with or without reason, and with or without notice at any time.
- I understand that this application will be kept on file for one year from the date completed, after which time I would have to reapply in accordance with established company procedures.
- I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that any misrepresentation or falsification of information or significant omissions on either this application or during the pre-employment process will result in my application being rejected, or , may be cause for subsequent dismissal if I am hired.
- I also understand that any offer of employment is conditioned on pre-employment procedures, which includes a background check, drug tests and documentation. I will, upon request, sign all necessary consent and authorization and release forms. I voluntarily and knowingly authorize the company and/or its agents, to verify and aspect of the information contained in my employment application or through public and private sources. I authorize any third party organization to perform a consumer report and background investigation. I also authorize and consent any companies, schools or persons listed on this application (or accompanying resume) to give any information regarding my employment, qualifications and character to Bowlin Group LLC. I understand that the employment information may include, but is not necessarily limited to, performance evaluation and reports, job description, disciplinary reports, letters of reprimand, and opinions regarding my suitability for employment possessed by it.
- I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless you, your agents and any former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs including attorney's fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release of any such information to you, your agents, or consumer reporting agency.
- I understand that I may be required to take a drug test as a part of the application process, as a condition of employment or any time during employment. I may also be required to take and pass a physical exam if I am selected for employment and before beginning employment.
- I have read and understand the contents of the employment application and am fully able and competent to complete it.

Date

Signature

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER
M/F/D/V**

CRIMINAL HISTORY ADDENDUM*

ALL APPLICANTS MUST COMPLETE A CRIMINAL HISTORY ADDENDUM

Have you ever been convicted of a felony that has not been expunged, sealed, pardoned, annulled, statutorily eradicated or dismissed upon conditions or probation? You are not required to disclose sealed or expunged records of conviction or arrest. Answer in the boxes provided below.

*NOTE: This addendum will be maintained in a confidential file.

ANSWER

- YES
- No Record

If you checked "Yes", please explain below. To help us evaluate your application, please describe the nature of the crime, the date of conviction and the nature of any rehabilitation.

Signature: _____

Printed Name: _____

Date: _____

EMPLOYMENT INQUIRY RELEASE

In conjunction with my application for employment (including contract services) with you, my prospective employer, I understand that you intend to hire Global HR Research to obtain Consumer Reports and /or Investigative Consumer Reports (hereinafter called "Reports") about me as defined in the Fair Credit Reporting Act (FCRA). These "Reports" may include information concerning my credit worthiness, credit standing, credit capacity, character, academic background credentials, work habits, work performance, work experience, reasons for work termination, general reputation, personal characteristics or mode of living. You also may seek information concerning my employment history, workers compensation history, motor vehicle record, education background, civil litigation history and/or criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer of employment to me. If you contemplate making an adverse employment-related decision that will affect me based, in whole or in part, upon a "Report" obtained from Global HR Research, I will be provided with a copy of the "Report" and a written summary of my Consumer Rights under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize you, Global HR Research or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am hired, this authorization shall remain on file and shall serve as an ongoing authorization for you to obtain "Reports" about me from Global HR Research at any time during my employment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

Signature _____ Date _____

THE FOLLOWING INFORMATION IS REQUIRED TO CONDUCT THE BACKGROUND INVESTIGATION

PRINT NAME _____
Last Name First Name Middle Initial Social Security Number

PREVIOUS OR MAIDEN NAME (If applicable) _____ PHONE NUMBER _____

CURRENT DRIVER'S LICENSE NUMBER _____ STATE ISSUED _____

DRIVER'S LICENSE NUMBER IN PAST 3 YEARS

(OTHER THAN ONE LISTED ABOVE) _____ STATE ISSUED _____

List states and counties of residence, other than above, for the past seven (7) years.

COUNTY _____ STATE _____ ; COUNTY _____ STATE _____ ; COUNTY _____ STATE _____

FOR IDENTIFICATION PURPOSES ONLY: Date of birth _____

My prospective employer understands age to be a protected characteristic and the information requested will not be used as the basis for any employment decision.

Notice to California Applicants:

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by Global HR Research during normal business hours. You may also obtain a copy of this file, either in person or by mail, by submitting proper identification and paying the costs of duplication services. You may also receive a summary of the file by telephone by being able to provide adequate identification as to allow Global HR Research to determine with reasonable certainty that you are the subject of the report. Global HR Research is required to have personnel available to explain your file to you and must explain to you any coded information appearing in your file. If you appear in person, another person of your choice may accompany you, providing that this additional person furnishes proper identification.
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By checking this box, I request to receive a free copy of any "Report" ordered on me. <input type="checkbox"/>
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Notice to Minnesota and Oklahoma applicants or employees only:

Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Bowlin Group of Companies. <input type="checkbox"/>
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Motor Vehicle Record Disclosure and Release Form

In connection with my ongoing employment or my application for employment, should I have or secure a position with Bowlin Group, LLC., I understand that a motor vehicle record, which contains public record information and public record information concerning my driving record from federal, state and other agencies that maintain such records, as well as independent services that provide driving record information.

I authorize, without reservation, any party or agency contacted to furnish the above – mentioned information to Bowlin Group, LLC, Hutson Group, Inc. their Agent or their Insurance Carrier.

I hereby authorize procurement of my motor vehicle report. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment. Bowlin Group, LLC's commercial auto insurer and agent will also use this information in conjunction with loss control and safety review efforts.

Full Legal name (include middle initial)

Social Security Number

Driver's License Number

State of Issuance

Date of Birth

Signature

Date