

Technical Building Services Inc.
TBS Controls, LLC. Advanced Comfort Systems, Inc.
Application for Employment

TBS considers applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

Position Applied For _____ Date of Application _____

Last Name _____ First Name _____ Middle Name _____

Address _____ City _____ State _____ Zip _____

Telephone No. _____ Social Security No. _____ - - _____

Best time to contact you at home is: _____ AM

_____ PM

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes No

Have you been convicted of a felony within the past 7 years?
 (Does not automatically disqualify you from employment)

Yes No

Do you have a valid drivers license?

Yes No

If Yes, give license No. _____

Have you ever filed an application with TBS before?

Yes No

If Yes, give date _____

Have you ever been employed with us before?

Yes No

If Yes, give dates _____ to _____

Do any of your friends or relatives work for TBS?

Yes No

If Yes, state name and relationship _____

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

Are you prevented from lawfully becoming employed in this country because of Visa Or Immigration Status?

Yes No

(Proof of citizenship or immigration status will be required upon employment)

Date Available for work _____ What is your desired salary range? _____

Are you available to work: Full Time

Part time Time Available _____ to _____

Temporary Dates Available _____ to _____

Are you currently on "Lay-Off" status and subject to recall?

Yes No

Can you travel if a job requires it?

Yes No

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Education

School	Name and Address	Course of Study	Degree
High School			
College			
Graduate School			
Other			

Work Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed		Worked performed
Address	From	To	
Telephone Number			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Worked performed
Address	From	To	
Telephone Number			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Worked performed
Address	From	To	
Telephone Number			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employer	Dates Employed		Worked performed
Address	From	To	
Telephone Number			
Job Title	Hourly Rate/Salary		
Supervisor	Starting	Final	
Reason for Leaving			May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No

Comments: Including explanation of any gaps in employment.

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Describe any job-related training received in the US Military.

Describe any training, apprenticeship, skills and extra curricular activities.

Additional Information (Other Qualifications)

Note to Applicants: Do Not answer this question unless you have been informed about the requirements of the job for which you are applying.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

 Yes

 No

Personal/Professional References (do not include family members or past supervisors)

Name	Phone No.	Occupation
Name	Phone No.	Occupation
Name	Phone No.	Occupation

Applicant's Statement

I certify that answers given herein are true and complete.
 I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
 This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at that time
 I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with TBS is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by written document or conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.
 In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date



Technical Building Services, Inc.
TBS Controls, LLC Advanced Comfort Systems, Inc.
12 E Commerce Drive
Ballston Spa, NY 12020
Phone (518) 885-4444
Fax (518) 885-4680
www.tbscontrols.com

Authorization Form

In an effort to ensure the safety and security of our employees and customers, TBS will investigate the background and DMV record of prospective employees. This information will be kept on file and periodically updated. Please provide us with the following information so that we can efficiently and accurately perform this investigation.

Name _____
SS Number _____
Date of Birth _____
Driver's License Number _____
Driver's License State _____

Current Address:

Address _____
City _____
State _____
Zip _____
County _____
of Yrs _____

Previous Address (complete only if at current address less than 3 years):

Address _____
City _____
State _____
Zip _____
County _____
of Yrs _____

I hereby authorize Technical Building Services, Inc./TBS Controls, LLC. or its agents to perform an investigation of my employment and personal history through any investigative or credit agencies of its choice.

Signature

Date

