

# C. V. Wenger, Inc.

10 Sanders Circle  
Chambersburg, PA 17202  
Phone: (717) 263-1469  
Fax: (717) 263-9045

## Employment Application

(Please Print Clearly – complete all pages)

Position(s) Applying for:

[www.cvwenger.com](http://www.cvwenger.com)

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

### Personal Information

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

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

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

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

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

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

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

Current Employer: (if any) \_\_\_\_\_

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

Employment Type Desired:  Full-time  Part-time

Desired Compensation: \$ \_\_\_\_\_  Hourly  Annual

Other Compensations Desired: \_\_\_\_\_

When are you available to start work? \_\_\_\_\_

| TYPE OF SCHOOL       | NAME OF SCHOOL | LOCATION | # OF YEARS COMPLETED | MAJOR & DEGREE |
|----------------------|----------------|----------|----------------------|----------------|
| High School          |                |          |                      |                |
|                      |                |          |                      |                |
| College/University   |                |          |                      |                |
|                      |                |          |                      |                |
| Bus. Or Trade School |                |          |                      |                |
|                      |                |          |                      |                |
| Professional School  |                |          |                      |                |
|                      |                |          |                      |                |

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. \_\_\_\_\_

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: \_\_\_\_\_

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: \_\_\_\_\_

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:<br>To:     | Start:<br>Final: |
|   | Your last job title:    |                  |                  |
| Phone:  |                         |                  |                  |
| Specific reason for leaving:  |                         |                  |                  |
| List the jobs you held, duties performed, skills used or learned, advancement 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:<br>To:     | Start:<br>Final: |
|   | Your last job title:    |                  |                  |
| Phone:  |                         |                  |                  |
| Specific reason for leaving:  |                         |                  |                  |
| List the jobs you held, duties performed, skills used or learned, advancement or promotions while you worked at this company. |                         |                  |                  |
| May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                         |                  |                  |

|   |                                |                         |                      |
|---|--------------------------------|-------------------------|----------------------|
| Name of employer:<br><br>Address with city/state/zip:<br><br>Phone: | <b>Name of last supervisor</b> | <b>Employment Dates</b> | <b>Pay or Salary</b> |
|   |                                | From:<br>To:            | Start:<br>Final:     |
|   | Your last job title:           |                         |                      |

Specific reason for leaving:

List the jobs you held, duties performed, skills used or learned, advancement or promotions while you worked at this company.

May we contact this employer?  Yes  No

|   |                                |                         |                      |
|---|--------------------------------|-------------------------|----------------------|
| Name of employer:<br><br>Address with city/state/zip:<br><br>Phone: | <b>Name of last supervisor</b> | <b>Employment Dates</b> | <b>Pay or Salary</b> |
|   |                                | From:<br>To:            | Start:<br>Final:     |
|   | Your last job title:           |                         |                      |

Specific reason for leaving:

List the jobs you held, duties performed, skills used or learned, advancement or promotions while you worked at this company.

May we contact this employer?  Yes  No



Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. If you have a resume, please include it with this application.\

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**Plumbing Industry Skills**

**Plumbing 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.

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

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Backflow Prevention | <input type="checkbox"/> Fire Sprinkler Systems | <input type="checkbox"/> Sanitation Systems | <input type="checkbox"/> Boilers            |
| <input type="checkbox"/> Geo Thermal         | <input type="checkbox"/> Septic Systems         | <input type="checkbox"/> Chilled Water      | <input type="checkbox"/> Heating Systems    |
| <input type="checkbox"/> Storm Drainage      | <input type="checkbox"/> Chillers               | <input type="checkbox"/> Hot Water Systems  | <input type="checkbox"/> Water Conditioners |

Plumbing Industry Skills Continued

- Circulating Systems
- In-Floor
- Water Purification Systems
- Drainage Systems
- Hydronic
- Water Heaters
- Distribution Systems
- Radiant Heating
- Water Filtration Systems
- Compressed Air Systems
- Medical Gas Systems
- Cold Water Systems
- Irrigation Systems
- Well Water Systems

**What types of pipe and lines have you worked with? (Select all that apply)**

- ABS Pipes
- Air Lines
- Black Iron Pipe
- Cast Iron Pipe
- Copper Pipe
- CPVC Pipe
- DWV Pipe
- FIP (Female Iron Pipe)
- Flexible Hoses
- Fuel
- Galvanized Pipe
- Glass Pipe
- Hydraulic Lines
- IPS (Iron Pipe Size)
- Lead Pipe
- LPG (Liquid Propane Gas)
- MIP (Male Iron Pipe)
- Natural Gas
- Oil
- Oxygen Lines
- Pneumatic Lines
- Propane
- PVC Pipe
- Sanitary Lines
- Sewer Pipe
- Steel Pipe
- Supply Lines
- Vacuum Lines
- Vitrified Clay Pipe
- Water

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

- Aircraft
- Clean Rooms
- Commercial
- Floating Floor
- Government Projects
- Grocery Stores
- Hospitals
- Industrial
- Marine
- Multi-Family
- Off-Shore
- Pools
- Public Utilities
- Residential
- Restaurants
- Schools

**What specific parts, pumps, valves, fittings, etc. have you worked with? (Select all that apply)**

- Aerator
- Air Admittance Valves
- Air Gaps
- Ball Valves
- Bath Tubs
- Bidets
- Closet Flanges
- Commodes
- Compressors
- Dish Washers
- Diverter
- Flange
- Garbage Disposals
- Grease Traps
- Ice Machines
- Instant Hot Water
- Interceptors
- Leaders
- Lift Stations
- Lint Traps
- Mixing Valves
- PEX insert fittings & valves
- Roof Drains
- Separators
- Sewage Ejectors
- Showers
- Sinks
- Sump Pumps
- Supply Stops
- Thermostatic Valve
- Traps
- Urinals
- Vacuum Breaker
- Fixtures
- Water Hammer Arrestors
- Pumps
- Fixed Flow Restrictors
- Vent
- Pressure Reducing Valves
- Fittings
- Valves
- Pressure Balance Valve
- Dual Check Valves

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

- Activity Reporting
- Activity Tracking
- Assembling
- Backflow
- Brazing
- Budgeting
- Building Codes
- Carpentry

Plumbing Industry Skills Continued

- Consultative Selling
- Conventions/Trade Shows
- Design/Build
- Draftsman
- Engineer/PE
- Forecasting
- General Construction
- Hydro Jetting
- Inventory Control
- Contract Selling
- Cross Connection
- Designer
- Drain Cleaning
- Estimator
- Foreman
- General Manager
- Hydrostatic Testing
- Journeyman
- Contract Negotiations
- Customer Service
- Develop Relationships/Alliances
- Driving
- Executive
- Four-Wheel Steel Pipe Cutter
- Gluing
- Inspector
- Layout
- Contract/Proposal Preparation
- Cutting Torch
- Drafting
- Drywall Repair
- Flaring
- Gasket Join
- Goal Setting
- International Plumbing Code
- Lead Generation

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Lead Management                 | <input type="checkbox"/> Lead Oakum Joint        | <input type="checkbox"/> Leadership                  | <input type="checkbox"/> Leak Detection               |
| <input type="checkbox"/> Leak Detection Equipment        | <input type="checkbox"/> Machine Operator        | <input type="checkbox"/> Maintenance                 | <input type="checkbox"/> Maintenance -Apartment       |
| <input type="checkbox"/> Manager                         | <input type="checkbox"/> Manufacturer Rep        | <input type="checkbox"/> Market Analysis             | <input type="checkbox"/> Material Handler             |
| <input type="checkbox"/> National Standard Plumbing Code | <input type="checkbox"/> Negotiate Contracts     | <input type="checkbox"/> One-Wheel Steel Pipe Cutter | <input type="checkbox"/> Operate Power Tools          |
| <input type="checkbox"/> Operations Manager              | <input type="checkbox"/> P&L                     | <input type="checkbox"/> PHCC Apprentice Program     | <input type="checkbox"/> Pipe Bending                 |
| <input type="checkbox"/> Pipe Cutting                    | <input type="checkbox"/> Pipe Joining            | <input type="checkbox"/> Pipe Threading              | <input type="checkbox"/> Pipe Threading Machine       |
| <input type="checkbox"/> Piping                          | <input type="checkbox"/> Plan-O-Grams/Schematics | <input type="checkbox"/> Plan/Spec                   | <input type="checkbox"/> Policy/Procedure Development |
| <input type="checkbox"/> Power Driven Vise Stand         | <input type="checkbox"/> Power Tools             | <input type="checkbox"/> Product Demonstration       | <input type="checkbox"/> Production                   |
| <input type="checkbox"/> Project Management              | <input type="checkbox"/> Promotions Development  | <input type="checkbox"/> Proposal Development        | <input type="checkbox"/> Prospecting/Lead Generation  |
| <input type="checkbox"/> Punch List                      | <input type="checkbox"/> Purchase Orders         | <input type="checkbox"/> Purchasing                  | <input type="checkbox"/> Quality Assurance/Control    |
| <input type="checkbox"/> Re-piping                       | <input type="checkbox"/> Report Generation       | <input type="checkbox"/> Reporting                   | <input type="checkbox"/> OEM                          |
| <input type="checkbox"/> Field Supervisor                | <input type="checkbox"/> Facility Manager        | <input type="checkbox"/> Research                    | <input type="checkbox"/> Rough-In                     |
| <input type="checkbox"/> Safety Coordinator              | <input type="checkbox"/> Sales                   | <input type="checkbox"/> Sales- In Home              | <input type="checkbox"/> Sales-Residential            |
| <input type="checkbox"/> Sales- Retail                   | <input type="checkbox"/> Sales- Wholesale        | <input type="checkbox"/> Sales Management Area       | <input type="checkbox"/> Service                      |
| <input type="checkbox"/> Service Agreements              | <input type="checkbox"/> Sewer Snakes            | <input type="checkbox"/> Shipping/Receiving          | <input type="checkbox"/> Sizing Pipes                 |
| <input type="checkbox"/> Soldering                       | <input type="checkbox"/> Staffing                | <input type="checkbox"/> Steamfitter                 | <input type="checkbox"/> Strategic Alliances          |
| <input type="checkbox"/> Superintendent                  | <input type="checkbox"/> Supervision             | <input type="checkbox"/> Take-offs                   | <input type="checkbox"/> Team Building                |
| <input type="checkbox"/> Technician                      | <input type="checkbox"/> Trainer                 | <input type="checkbox"/> Troubleshooting             | <input type="checkbox"/> Tubing Cutter                |
| <input type="checkbox"/> ULF (Ultra Low Flush)           | <input type="checkbox"/> Under Slab Re-route     | <input type="checkbox"/> Under Slab Repairs          | <input type="checkbox"/> Uniform Plumbing Code        |
| <input type="checkbox"/> Water Service                   | <input type="checkbox"/> Welding                 | <input type="checkbox"/> NFSA Apprentice Program     |   |

**Certifications & Licenses**

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Apprentice Plumber License             | <input type="checkbox"/> ICC Plumbing Code Official         | <input type="checkbox"/> Journeyman Plumber License     |
| <input type="checkbox"/> ASPE-CPD (Certified in Plumber Design) | <input type="checkbox"/> ICC Plumber Inspector              | <input type="checkbox"/> Master Plumber License         |
| <input type="checkbox"/> IAMPO Certified Inspector              | <input type="checkbox"/> ICC Plumber Plans Examiner         | <input type="checkbox"/> NSF Certification              |
| <input type="checkbox"/> ICC Commercial Plumber Inspector       | <input type="checkbox"/> ICC Residential Plumbing Inspector | <input type="checkbox"/> Registered Profession Engineer |

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

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

**HVAC/R Industry Skills**

**HVAC/R 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.

**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

**Manufactures Equipment have you worked with?** (Select all that apply)

- American Standard       Delfield       Kold Draft       Ruud       Toshiba

**HVAC/R Industry Skills Continued**

- |   |   |                                  |                                    |                                   |
|---|---|----------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Andover Controls | <input type="checkbox"/> Electro Freeze | <input type="checkbox"/> Lennox  | <input type="checkbox"/> Sani Serv | <input type="checkbox"/> Trane    |
| <input type="checkbox"/> Beverage Air     | <input type="checkbox"/> Frigidaire     | <input type="checkbox"/> Liebert | <input type="checkbox"/> Seibe     | <input type="checkbox"/> Traulsen |

- |   |   |                                    |                                      |                                       |
|---|---|------------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Bryant             | <input type="checkbox"/> Gibson           | <input type="checkbox"/> Luxaire   | <input type="checkbox"/> Siemens     | <input type="checkbox"/> TRUE         |
| <input type="checkbox"/> Carrier            | <input type="checkbox"/> Honeywell        | <input type="checkbox"/> Manitowoc | <input type="checkbox"/> Storling    | <input type="checkbox"/> United       |
| <input type="checkbox"/> Coleman            | <input type="checkbox"/> Hoshizaki        | <input type="checkbox"/> Maytag    | <input type="checkbox"/> Tappan      | <input type="checkbox"/> Victory      |
| <input type="checkbox"/> Cornecius          | <input type="checkbox"/> Ice O Matic      | <input type="checkbox"/> McQuay    | <input type="checkbox"/> Taylor      | <input type="checkbox"/> Vogt         |
| <input type="checkbox"/> Crystal Tip        | <input type="checkbox"/> ICEE             | <input type="checkbox"/> Perlick   | <input type="checkbox"/> Tekmar      | <input type="checkbox"/> Westinghouse |
| <input type="checkbox"/> Cummins & Woodward | <input type="checkbox"/> Johnson Controls | <input type="checkbox"/> Philco    | <input type="checkbox"/> Thermo King | <input type="checkbox"/> York         |
| <input type="checkbox"/> Daikin             | <input type="checkbox"/> Kelvinator       | <input type="checkbox"/> Rheem     |                                      |                                       |

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

- |  |  |   |   |   |
|--|--|---|---|---|
| <input type="checkbox"/> 410A                  | <input type="checkbox"/> Chillers                    | <input type="checkbox"/> Freezers –Commercial     | <input type="checkbox"/> Oil                    | <input type="checkbox"/> Split Systems            |
| <input type="checkbox"/> Absorption Systems    | <input type="checkbox"/> Cold-Plate Systems          | <input type="checkbox"/> Frozen Beverage Machines | <input type="checkbox"/> Ovens – Electric       | <input type="checkbox"/> Steam                    |
| <input type="checkbox"/> Air Dist. Equipment   | <input type="checkbox"/> Commercial Cooking Equip    | <input type="checkbox"/> Furnace                  | <input type="checkbox"/> Ovens – Gas            | <input type="checkbox"/> Trailer Units            |
| <input type="checkbox"/> Air Handlers          | <input type="checkbox"/> Cooling Towers              | <input type="checkbox"/> Gas                      | <input type="checkbox"/> Package Units          | <input type="checkbox"/> Transport Refrigeration  |
| <input type="checkbox"/> Ammonia               | <input type="checkbox"/> Dehumidification            | <input type="checkbox"/> Gas Stoves               | <input type="checkbox"/> Parallel Refrigeration | <input type="checkbox"/> Variable Speed Equipment |
| <input type="checkbox"/> Anti-Vibrations       | <input type="checkbox"/> Dish Washers                | <input type="checkbox"/> Geo Thermal              | <input type="checkbox"/> Portable HVAC          | <input type="checkbox"/> VAV                      |
| <input type="checkbox"/> Appliances            | <input type="checkbox"/> Dry Systems                 | <input type="checkbox"/> Ground Source Heat Pump  | <input type="checkbox"/> Propane                | <input type="checkbox"/> Ventilation              |
| <input type="checkbox"/> Appliances- Home      | <input type="checkbox"/> Dry-Coolers                 | <input type="checkbox"/> Heat Pumps               | <input type="checkbox"/> Puron                  | <input type="checkbox"/> VRF                      |
| <input type="checkbox"/> Bobtail Units         | <input type="checkbox"/> Dryers – Clothes            | <input type="checkbox"/> Humidifications          | <input type="checkbox"/> Radiant Heat           | <input type="checkbox"/> VRV                      |
| <input type="checkbox"/> Boilers               | <input type="checkbox"/> Electric Stoves             | <input type="checkbox"/> HVAC Equipment           | <input type="checkbox"/> Reach-Ins              | <input type="checkbox"/> Walk-Ins                 |
| <input type="checkbox"/> Cascade Refrigeration | <input type="checkbox"/> Environmental Test Chambers | <input type="checkbox"/> Hydronic                 | <input type="checkbox"/> Recipricating          | <input type="checkbox"/> Washers – Clothes        |
| <input type="checkbox"/> Central Plants        | <input type="checkbox"/> Exhaust Systems             | <input type="checkbox"/> Ice Cream Machines       | <input type="checkbox"/> Refrigeration          | <input type="checkbox"/> Water Heaters            |
| <input type="checkbox"/> Centrifungal          | <input type="checkbox"/> FCB Machines                | <input type="checkbox"/> Ice Machines             | <input type="checkbox"/> Refrigerators          | <input type="checkbox"/> Wet Systems              |
| <input type="checkbox"/> Chilled Water         | <input type="checkbox"/> Forced Air Systems          | <input type="checkbox"/> In-Floor                 | <input type="checkbox"/> Rooftop Units          | <input type="checkbox"/> Window Units (ACS)       |

**What types of Parts & Accessories have you worked with? (Select all that apply)**

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

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

- |   |  |   |                                       |                                       |
|---|--|---|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Clean Rooms    | <input type="checkbox"/> Government Projects | <input type="checkbox"/> Institutional    | <input type="checkbox"/> Multi-Family | <input type="checkbox"/> Residential  |
| <input type="checkbox"/> Cold Storage   | <input type="checkbox"/> Grocery Stores      | <input type="checkbox"/> International    | <input type="checkbox"/> Off-Shore    | <input type="checkbox"/> Restaurants  |
| <input type="checkbox"/> Commercial     | <input type="checkbox"/> Hospitals           | <input type="checkbox"/> Light Commercial | <input type="checkbox"/> Pools        | <input type="checkbox"/> Snow Melting |
| <input type="checkbox"/> Floating Floor | <input type="checkbox"/> Industrial          | <input type="checkbox"/> Marine           |                                       |                                       |

**What types of Building Automation or controls experience do you have?**

- |  |  |   |                              |   |
|--|--|---|------------------------------|---|
| <input type="checkbox"/> Building Automation | <input type="checkbox"/> Controls – Design | <input type="checkbox"/> Controls – Programming | <input type="checkbox"/> DDC | <input type="checkbox"/> Pneumatic Controls |
| <input type="checkbox"/> Controls            |  |   |                              |   |

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

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Activity Reporting | <input type="checkbox"/> Business Development | <input type="checkbox"/> Client Interaction        | <input type="checkbox"/> Contract/Proposal Preparation |
| <input type="checkbox"/> Assembling         | <input type="checkbox"/> Carpentry            | <input type="checkbox"/> Client/Account Management | <input type="checkbox"/> Engineer/PE                   |
| <input type="checkbox"/> Brazing            | <input type="checkbox"/> Change Orders        | <input type="checkbox"/> Consultative Selling      | <input type="checkbox"/> Estimating                    |

**HVAC/R Industry Skills Continued**

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Estimator            | <input type="checkbox"/> Executive        | <input type="checkbox"/> Expense Reports | <input type="checkbox"/> Fabrication   |
| <input type="checkbox"/> Facility Manager     | <input type="checkbox"/> Field Supervisor | <input type="checkbox"/> Forecasting     | <input type="checkbox"/> Foreman       |
| <input type="checkbox"/> General Construction | <input type="checkbox"/> General Manager  | <input type="checkbox"/> Goal Setting    | <input type="checkbox"/> Heat Transfer |

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Inspector           | <input type="checkbox"/> Installation                 | <input type="checkbox"/> Installation – New Homes        | <input type="checkbox"/> Installer          |
| <input type="checkbox"/> Instructor          | <input type="checkbox"/> International                | <input type="checkbox"/> Negotiate Contracts             | <input type="checkbox"/> Operations Manager |
| <input type="checkbox"/> P&L                 | <input type="checkbox"/> Leadership                   | <input type="checkbox"/> Pipefitter                      | <input type="checkbox"/> Lead Management    |
| <input type="checkbox"/> Piping              | <input type="checkbox"/> Plan-O-Grams/Schematics      | <input type="checkbox"/> Plan/Spec                       | <input type="checkbox"/> PLC                |
| <input type="checkbox"/> Plumbing            | <input type="checkbox"/> Policy/Procedure Development | <input type="checkbox"/> Preventative Maintenance        | <input type="checkbox"/> Project Management |
| <input type="checkbox"/> Retro-Fit           | <input type="checkbox"/> Sales                        | <input type="checkbox"/> Sales – In Home                 | <input type="checkbox"/> Sales- Residential |
| <input type="checkbox"/> Sales- Retail       | <input type="checkbox"/> Service                      | <input type="checkbox"/> Service Agreements              | <input type="checkbox"/> Service Manager    |
| <input type="checkbox"/> Sheet Metal Worker  | <input type="checkbox"/> Shipping/Receiving           | <input type="checkbox"/> Start-Up                        | <input type="checkbox"/> Steamfitter        |
| <input type="checkbox"/> Strategic Alliances | <input type="checkbox"/> Supervision                  | <input type="checkbox"/> Welder                          | <input type="checkbox"/> NEBB               |
| <input type="checkbox"/> Team Building       | <input type="checkbox"/> Energy                       | <input type="checkbox"/> Material Handler                | <input type="checkbox"/> Reporting          |
| <input type="checkbox"/> Design/Build        | <input type="checkbox"/> Take-Offs                    | <input type="checkbox"/> Customer Service                | <input type="checkbox"/> Repair             |
| <input type="checkbox"/> Journeyman          | <input type="checkbox"/> Superintendent               | <input type="checkbox"/> Energy Management               | <input type="checkbox"/> Market Analysis    |
| <input type="checkbox"/> Lead Generation     | <input type="checkbox"/> Proposal Development         | <input type="checkbox"/> NATE Certification              | <input type="checkbox"/> LEED               |
| <br>   |   |  |   |
| <input type="checkbox"/> Punch List          | <input type="checkbox"/> Technician                   | <input type="checkbox"/> Designer                        | <input type="checkbox"/> Load Calculations  |
| <input type="checkbox"/> Purchase Orders     | <input type="checkbox"/> Research                     | <input type="checkbox"/> Develop Relationships/Alliances | <input type="checkbox"/> Machine Operator   |
| <input type="checkbox"/> Purchasing          | <input type="checkbox"/> Electrical                   | <input type="checkbox"/> Drywall Repair                  | <input type="checkbox"/> Manufacturing      |
| <input type="checkbox"/> Maintenance         | <input type="checkbox"/> QA/AC Manager                | <input type="checkbox"/> Engineer/BSME                   | <input type="checkbox"/> Welding            |
| <input type="checkbox"/> Drafting            | <input type="checkbox"/> Maintenance – Apartment      | <input type="checkbox"/> Quality Assurance/Control       | <input type="checkbox"/> Test & Balance     |
| <input type="checkbox"/> Draftsman           | <input type="checkbox"/> Manager                      | <input type="checkbox"/> Reading Blueprints              | <input type="checkbox"/> Thermodynamics     |
| <input type="checkbox"/> Driving             | <input type="checkbox"/> Relationship Management      | <input type="checkbox"/> Trainer                         |   |

**Certifications & Licenses**

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

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> (CAMT) Certified Apartment Maint Tech      | <input type="checkbox"/> HVAC Excellence –Gas Heat            | <input type="checkbox"/> Journeyman Plumber License       |
| <input type="checkbox"/> Certified Energy Manager                   | <input type="checkbox"/> HVAC Excellence –Geo Thermal         | <input type="checkbox"/> Master HVAC License              |
| <input type="checkbox"/> EPA 608 Type I                             | <input type="checkbox"/> HVAC Excellence – Heat Pumps         | <input type="checkbox"/> Master Plumber License           |
| <input type="checkbox"/> EPA 608 Type II                            | <input type="checkbox"/> HVAC Excellence – Hydronics I        | <input type="checkbox"/> NATE – A/C                       |
| <input type="checkbox"/> EPA 608 Type III                           | <input type="checkbox"/> HVAC Excellence - Hydronics II       | <input type="checkbox"/> NATE – Air Distribution          |
| <input type="checkbox"/> EPA 608 Universal                          | <input type="checkbox"/> HVAC Excellence – Oil Heat           | <input type="checkbox"/> NATE – Gas Heat                  |
| <input type="checkbox"/> HVAC Excellence- A/C                       | <input type="checkbox"/> ICE – Commercial Refrigeration       | <input type="checkbox"/> NATE – Heat Pumps                |
| <input type="checkbox"/> HVAC Excellence – Commercial A/C           | <input type="checkbox"/> ICE – Light Commercial A/C & Heating | <input type="checkbox"/> NATE – Oil Heating               |
| <input type="checkbox"/> HVAC Excellence – Commercial Refrigeration | <input type="checkbox"/> ICE – Residential A/C & Heating      | <input type="checkbox"/> Oil Burner License               |
| <input type="checkbox"/> HVAC Excellence - Electrical Heat          | <input type="checkbox"/> Journeyman HVAC License              | <input type="checkbox"/> Registered Professional Engineer |

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

\_\_\_\_\_

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

**Electrical Industry Skills**

**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.

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

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Access Control    | <input type="checkbox"/> Hydraulic Systems         | <input type="checkbox"/> Radio-RF                                     | <input type="checkbox"/> Building Management     |
| <input type="checkbox"/> Low Voltage       | <input type="checkbox"/> Security Systems          | <input type="checkbox"/> CCTV   | <input type="checkbox"/> Manufacturing Equipment |
| <input type="checkbox"/> Signaling Systems | <input type="checkbox"/> Climate Control           | <input type="checkbox"/> Mechanical Systems                           | <input type="checkbox"/> Solid State             |
| <input type="checkbox"/> Data              | <input type="checkbox"/> Medium Voltage            | <input type="checkbox"/> Street & Highway Lighting                    | <input type="checkbox"/> Elevators               |
| <input type="checkbox"/> Overhead Cranes   | <input type="checkbox"/> Traffic Signaling         | <input type="checkbox"/> Emergency Critical Load Distribution Systems |  |
| <input type="checkbox"/> Pneumatic Systems | <input type="checkbox"/> Transistorized Subsystems | <input type="checkbox"/> Fire Systems                                 | <input type="checkbox"/> Power Distribution      |
| <input type="checkbox"/> Voice/Telecom     | <input type="checkbox"/> High Voltage              |   |  |

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

- |                              |                               |                               |                                      |                                |
|------------------------------|-------------------------------|-------------------------------|--------------------------------------|--------------------------------|
| <input type="checkbox"/> 110 | <input type="checkbox"/> 4160 | <input type="checkbox"/> Cat5 | <input type="checkbox"/> Fiber Optic | <input type="checkbox"/> Phone |
| <input type="checkbox"/> 220 | <input type="checkbox"/> 480  | <input type="checkbox"/> Coax |                                      |                                |

**What specific parts, accessories, or fixtures have you worked with? (Select all that apply)**

- |   |   |   |  |
|---|---|---|--|
| <input type="checkbox"/> 3- Way Switches      | <input type="checkbox"/> Electrical Switchgear Assemblies | <input type="checkbox"/> Motors                       | <input type="checkbox"/> AC              |
| <input type="checkbox"/> Fluorescent Lighting | <input type="checkbox"/> Outlets                          | <input type="checkbox"/> Attic Fans                   | <input type="checkbox"/> Fuse Box        |
| <input type="checkbox"/> Panel Boards         | <input type="checkbox"/> Ceiling Fans                     | <input type="checkbox"/> Fuses                        | <input type="checkbox"/> PLC             |
| <input type="checkbox"/> Circuit Breaker Box  | <input type="checkbox"/> Generators                       | <input type="checkbox"/> Relays                       | <input type="checkbox"/> Conduit Pipe    |
| <input type="checkbox"/> Halogen Lighting     | <input type="checkbox"/> Service Box                      | <input type="checkbox"/> Conduit Tubing               | <input type="checkbox"/> Intercoms       |
| <input type="checkbox"/> Terminals            | <input type="checkbox"/> Control Panel                    | <input type="checkbox"/> Lighting Fixtures – Recessed | <input type="checkbox"/> Transformers    |
| <input type="checkbox"/> DC                   | <input type="checkbox"/> Lighting Fixtures– Surface Mount | <input type="checkbox"/> Variable Frequency Drive     | <input type="checkbox"/> Dimmer Switches |
| <input type="checkbox"/> Load Centers         | <input type="checkbox"/> Wall Switch                      | <input type="checkbox"/> Electric Meter               | <input type="checkbox"/> Motor Controls  |

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

- |                                      |  |  |   |                                      |
|--------------------------------------|--|--|---|--------------------------------------|
| <input type="checkbox"/> Aircraft    | <input type="checkbox"/> Floating Floor      | <input type="checkbox"/> Industrial    | <input type="checkbox"/> Multi-Family     | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Clean Rooms | <input type="checkbox"/> Government Projects | <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Off-Shore        | <input type="checkbox"/> Schools     |
| <input type="checkbox"/> Commercial  | <input type="checkbox"/> Hospitals/Medical   | <input type="checkbox"/> Marine        | <input type="checkbox"/> Public Utilities |                                      |

**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                |
| <input type="checkbox"/> Activity Tracking    | <input type="checkbox"/> Electrical Compatibility        | <input type="checkbox"/> OEM                          | <input type="checkbox"/> Sales – In Home      |
| <input type="checkbox"/> Engineer/PE          | <input type="checkbox"/> Operate Power Tools             | <input type="checkbox"/> Sales – Retail               | <input type="checkbox"/> Estimator            |
| <input type="checkbox"/> Operations Manager   | <input type="checkbox"/> Executive                       | <input type="checkbox"/> P&L                          | <input type="checkbox"/> Sales - Residential  |
| <input type="checkbox"/> Air Hammer Operation | <input type="checkbox"/> Plan-O-Grams/Schematics         | <input type="checkbox"/> ANSI                         | <input type="checkbox"/> Fabricating          |
| <input type="checkbox"/> Plan/Spec            | <input type="checkbox"/> Appliance Installation          | <input type="checkbox"/> Facility Manager             | <input type="checkbox"/> Planning             |
| <input type="checkbox"/> Assembling           | <input type="checkbox"/> Field Supervisor                | <input type="checkbox"/> Policy/Procedure Development | <input type="checkbox"/> Building Codes       |
| <input type="checkbox"/> Forecasting          | <input type="checkbox"/> Power Tools                     | <input type="checkbox"/> Service                      | <input type="checkbox"/> General Construction |
| <input type="checkbox"/> Foreman              | <input type="checkbox"/> Service Agreements              | <input type="checkbox"/> Business Development         | <input type="checkbox"/> Carpentry            |
| <input type="checkbox"/> General Manager      | <input type="checkbox"/> Proposal Development            | <input type="checkbox"/> Shipping/Receiving           | <input type="checkbox"/> IEEE                 |
| <input type="checkbox"/> Goal Setting         | <input type="checkbox"/> Sizing Wires/Cables             | <input type="checkbox"/> Change Orders                | <input type="checkbox"/> Purchase Orders      |
| <input type="checkbox"/> Punch List           | <input type="checkbox"/> Soldering                       | <input type="checkbox"/> Inspector                    | <input type="checkbox"/> Installation         |
| <input type="checkbox"/> Client Interaction   | <input type="checkbox"/> Install Conduit                 | <input type="checkbox"/> Purchasing                   | <input type="checkbox"/> Instructor           |
| <input type="checkbox"/> Superintendent       | <input type="checkbox"/> Installation – New Construction | <input type="checkbox"/> Supervision                  | <input type="checkbox"/> Conduit Benders      |
| <input type="checkbox"/> Take- Offs           | <input type="checkbox"/> Team Building                   | <input type="checkbox"/> International                |   |



### Electrical Industry Skills Continued

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> Inventory Control        | <input type="checkbox"/> Quality Assurance Control       | <input type="checkbox"/> Connect Wires       | <input type="checkbox"/> Journeyman            |
| <input type="checkbox"/> Read Blueprints          | <input type="checkbox"/> Layout                          | <input type="checkbox"/> Read Schematics     | <input type="checkbox"/> Contract Negotiations |
| <input type="checkbox"/> Test Meter Operation     | <input type="checkbox"/> Contract/ Proposal Preparation  | <input type="checkbox"/> Lead Management     | <input type="checkbox"/> Reporting             |
| <input type="checkbox"/> Tracing Short Circuits   | <input type="checkbox"/> Leadership                      | <input type="checkbox"/> Research            | <input type="checkbox"/> Trainer               |
| <input type="checkbox"/> Customer Service         | <input type="checkbox"/> Machine Operator                | <input type="checkbox"/> Rewire Structures   | <input type="checkbox"/> Troubleshooting       |
| <input type="checkbox"/> Maintenance              | <input type="checkbox"/> Rough-In                        | <input type="checkbox"/> Using Ammeters      | <input type="checkbox"/> Maintenance Apartment |
| <input type="checkbox"/> Run Wiring in Conduits   | <input type="checkbox"/> Using Ohmmeters                 | <input type="checkbox"/> Design/Build        | <input type="checkbox"/> Manager               |
| <input type="checkbox"/> Run Wiring Underground   | <input type="checkbox"/> Using Oscilloscopes             | <input type="checkbox"/> Designer            | <input type="checkbox"/> Safety                |
| <input type="checkbox"/> Using Voltmeters         | <input type="checkbox"/> Develop Relationships/Alliances | <input type="checkbox"/> Market Analysis     | <input type="checkbox"/> Safety Coordinator    |
| <input type="checkbox"/> Dispatching              | <input type="checkbox"/> Material Handler                | <input type="checkbox"/> Wiring – Connecting | <input type="checkbox"/> Drafting              |
| <input type="checkbox"/> National Electrical Code | <input type="checkbox"/> Wiring – Installation           | <input type="checkbox"/> Draftsman           | <input type="checkbox"/> NEC Standards         |
| <input type="checkbox"/> Preventative Maintenance | <input type="checkbox"/> Wiring – Testing                | <input type="checkbox"/> Driving             | <input type="checkbox"/> Negotiate Contracts   |

### Certifications & Licenses

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

- Apprentice Electrician License       Master Electrician License       Registered Professional Engineer  
 Journeyman Electrician License

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

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

### Job Guidelines

All work is expected to be performed neatly, quickly and efficiently. Standing around is frowned upon. If there is nothing to do, please ask someone. There may be heavy lifting from time to time. If any of the other trades (Plumbing, Heating, etc.) are busy and the one you apply for is not, you will be expected to help out. You are expected to get along with all other employees. Failure to follow these guidelines is grounds to terminate your job.

If you understand and agree to these requirements, initial here \_\_\_\_\_

1. You must wear a uniform.
2. No swearing, drinking or smoking inside buildings.
3. Hair, beard, mustache trimmed or clean shaven for safety reasons & appearance.
4. NO torn pants, shirts or coats.
5. You provide own work pants & boots
6. There is a 90 day trial period.
7. We provide partial shirts, coats & hats.
8. Good manners & courteous to all customers.
9. Able to drive all company trucks courteously
10. There will be evenings & weekends on call.
11. You may take truck home these weekends & evenings. Time and a half pay for evenings & weekends worked "on call".
12. On call will be required.
13. Work-week on call get 4 hr. minimum pay whether you worked or not.

14. Evening & weekend time may be traded for time off. Must give two week notice of days wanted off.

- ★ Health Insurance w/ Prescription
- ★ Vision available at employee's expense
- ★ Worker's Compensation
- ★ Base amount Disability & Life Insurance
- ★ Yearly Raises based on performance & appearance
- ★ 1 Week Paid Vacation after 1 Year; After 3 Years – 2 weeks; After 8 Years- 3 Weeks
- ★ Full Dental
- ★ Other Family Members may be added at cost to employee
- ★ Retirement Plan
- ★ Paid Holidays & 3 Sick Days

Please list 3-4 **people you have worked with** who can attest to your On-The-Job experience and performance.

|   |   |
|---|---|
| Name: _____<br>Position: _____<br>Company: _____<br>Telephone: (____) _____ - _____<br>Email Address: _____ | Name: _____<br>Position: _____<br>Company: _____<br>Telephone: (____) _____ - _____<br>Email Address: _____ |
| Name: _____<br>Position: _____<br>Company: _____<br>Telephone: (____) _____ - _____<br>Email Address: _____ | Name: _____<br>Position: _____<br>Company: _____<br>Telephone: (____) _____ - _____<br>Email Address: _____ |

**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 C. V. Wenger, Inc. creates an actual or implied contract of employment. I understand that, if I accept employment with C. V. Wenger, Inc., it will be on an at-will basis. This means that either C. V. Wenger, Inc. 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 C. V. Wenger Inc., I release C. V. Wenger, Inc., and it's employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize C. V. Wenger, Inc. 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 C. V. Wenger, Inc. and it's employees from all liability arising from such investigation.

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

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

C. V. Wenger, Inc. 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 C. V. Wenger, Inc. depends solely on your qualifications.