

# Application for Employment



This application is valid for a period of 60 days. Any applicant wanting further consideration must reapply.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

This application is being submitted to HCI Holdings, Inc. which represents: HunTel Communications, Inc., HunTel Security, and HunTel Engineering. Any reference to HCI Holdings, Inc. or HunTel in this application shall apply to any of the above mentioned companies.

Position(s) Applied For (Be Specific) \_\_\_\_\_ Date of Application \_\_\_\_\_

Referral Source:  Newspaper  Employee  
 Job web site  Relative  
 Walk-In  Other (List Source) \_\_\_\_\_

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

Address: \_\_\_\_\_  
Street City State Zip

Home Telephone #: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Best time to call you: \_\_\_\_\_ Date available for work: \_\_\_\_\_

May we contact you at work?  Yes  No If yes, list work number: \_\_\_\_\_

Have you applied here before?  Yes  No

Have you ever been employed by HunTel or any of the companies listed above?  Yes  No

If yes, indicate company: \_\_\_\_\_ and dates worked: \_\_\_\_\_

Do you have any relatives working for HCI Holdings, Inc. or one of the companies listed above?  Yes  No

If yes, list their name and company for which they work: \_\_\_\_\_

Type of employment desired:  Full Time  Part Time  Temporary  
 College Intern  Coop Student

Will you relocate if job requires it?  Yes  No

Will you travel if job requires it?  Yes  No

Are you able to meet the attendance requirements of the position?  Yes  No

Will you work overtime if required?  Yes  No

Have you been convicted of a felony in the last seven (7) years?  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Such conviction may be relevant if job related, but does not bar you from employment.

# Proof of Citizenship

If hired, could you provide proof of citizenship or work authorization?

Yes

No

NOTE: The law requires that you provide evidence and a sworn statement of your citizenship or work authorization if you are hired. Any offer of employment which you receive is contingent upon your providing the documentation and statement which we will request from you.

## Employment History

List your last four (4) employers or assignments, starting with the most recent, including relevant military experience. If listing volunteer activity, please exclude information which would reveal gender, race, religion, national origin, age, color, disability, or other protected status.

Employer	Telephone ( )	Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate/Salary		
		Final		
May we contact for reference	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	Per	
Employer	Telephone ( )	Dates Employed		Summarize the nature of the work performed and job responsibilities.
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate/Salary		
		Final		
May we contact for reference	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	Per	
Employer	Telephone ( )	Dates Employed		Summarize the nature of the work performed and job responsibilities.
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Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate/Salary		
		Final		
May we contact for reference	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	Per	
Employer	Telephone ( )	Dates Employed		Summarize the nature of the work performed and job responsibilities.
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Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for Leaving		Hourly Rate/Salary		
		Final		
May we contact for reference	<input type="checkbox"/> Yes <input type="checkbox"/> No	\$	Per	

# Educational Background

High School/GED \_\_\_\_\_ Circle highest grade completed  9  10  11  12 Graduated?  Yes  No

Secondary Education \_\_\_\_\_  13  14  15  16 Degree: \_\_\_\_\_ Major \_\_\_\_\_

Graduate School \_\_\_\_\_ Other relevant education or training: \_\_\_\_\_

## References

List three (3) persons we can contact who are able to evaluate your job related knowledge, skills & abilities.

Name	Telephone	Years Known
	( )	
	( )	
	( )	

Category	Yrs. Exp	Yrs. Exp	Yrs. Exp
Desktop Software		ActionScript	Dreamweaver / Fireworks
		CSS	Microsoft Access
		Crystal Reports	Microsoft Excel
		Desktop Publishing	Microsoft FrontPage
Hardware		Fax Server	Network Switches
		Firewalls	Network Wiring (CAT5)
		Installation & Setup	PC Repair/Upgrade
Networking		Active Directory	LAN Manager
		Cabling	LAN Server
		Cisco Routing	Layer2 (STP-VLAN)
Platform		AS/400	Linux
		CICS	Macintosh
		Free BSD	Mainframe - JCL
Programming		ASP/ASP.NET	HTML / CSS
		COBOL	Java
		Delphi	Perl / CGI
		Doc1	PHP / XML
Database		Access	FoxPro
		Dbase	Oracle
		DB2	Paradox

## Certifications, Skills, Training, Accomplishments

List all current certifications, licences, etc.

Describe your qualifications and skills for the work desired including types of equipment or machinery you can operate. Also list special accomplishments publications, and awards (Exclude information which would reveal gender, race, religion, national origin, age, color, disability or other protected status.)

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# Personal Driving Record

This section is to be completed ONLY if the operation of a motor vehicle will be required in the course of the applicant's employment

Have a valid driver's license?	Driver's license number:	Expiration date:	Issuing state:
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List any other state(s) in which you have had a driver's license(s) in the past:

## Within the past five years...

have you been involved in a vehicle accident?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
have you been convicted of reckless or drunken driving?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, give date(s):
have you been cited for moving violations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, give date(s):
have you had your driver's license revoked or suspended?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, explain:
have you had your driver's license restricted?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, explain:

I certify that the information contained in this application is true and complete and I understand, that if employed, false statements on this application shall be grounds for dismissal.

I voluntarily give HCI Holdings, Inc. the right to investigate my employment, education and personal history and agree to cooperate in an investigation, and release all parties from all liability for any damage that results from furnishing such information to HCI Holdings, Inc.

HCI Holdings, Inc. is an Equal Opportunity Employer. HCI Holdings, Inc. does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from HCI Holdings, Inc. and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, HCI Holdings, Inc. reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of HCI Holdings, Inc. has the authority to make any assurances to the contrary.

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

## For Human Resources Department Use Only

Hired . . . . .  Yes  No Date of Hire \_\_\_\_\_

Hired Position \_\_\_\_\_

Rate of pay \$ \_\_\_\_\_ Hr./Mo. \_\_\_\_\_ Pay Grade Review Date Schedule  6 Month  Annual

Division \_\_\_\_\_ Department \_\_\_\_\_

- EEO classification:
- |                           |                            |                              |
|---------------------------|----------------------------|------------------------------|
| 1. Officials and Managers | 4. Sales                   | 7. Operatives (semi-skilled) |
| 2. Professionals          | 5. Office and Clerical     | 8. Laborers                  |
| 3. Technicians            | 6. Craft Workers (skilled) | 9. Service Workers           |

Completed By \_\_\_\_\_ Date \_\_\_\_\_