

COASTLINE

ELECTRIC INC.



Ph. (843)357-7453 Fax (843)357-9242

Employment Application

We are an equal opportunity employer.

Position Applied For: _____ Date of Application: _____

Name: _____
Last First MI

Address: _____
Street City/State Zip

Phone: _____ Mobile: _____ SS#: _____ DOB: _____

Date Available To Start: _____ Wage Requested: _____

Have you ever been convicted of a crime? Yes _____ No _____

If "YES" please explain: _____

Do you have any injury or illness that may interfere with work? Yes _____ No _____ If so, please explain: _____

Do you have a valid driver's license? Yes _____ No _____ License # _____ State: _____ Expires: _____

Do you have a good driving record? Yes _____ No _____

If "NO" please explain: _____

Are you a legal citizen of the U.S.? Yes _____ No _____

Work Experience

Employer: _____ From: _____ To: _____

Address: _____ Supervisor: _____

Job Title: _____ Duties: _____

Hourly Rate: _____ Reason for leaving: _____

Employer: _____ From: _____ To: _____

Address: _____ Supervisor: _____

Job Title: _____ Duties: _____

Hourly Rate: _____ Reason for leaving: _____

Employer: _____ From: _____ To: _____

Address: _____ Supervisor: _____

Job Title: _____ Duties: _____

Hourly Rate: _____ Reason for leaving: _____

References

Name: _____ Phone: _____

Address: _____

Relationship: _____

Name: _____ Phone: _____

Address: _____

Relationship: _____

Name: _____ Phone: _____

Address: _____

Relationship: _____