Blanchard Equipment Service Technicians, LLC

***Commercial Building & Facility Maintenance Co.*** [***www.best-4all.com***](http://www.best-4all.com) ***24hour Emergency Service***

***(337) 332-1777 Post Office Box 186 Breaux Bridge, LA 70517***

**Application for Employment**

Send completed applications to: B.E.S.T., LLC P.O. Box 186, Breaux Bridge, LA 70517 or [tonia@best-4all.com](mailto:tonia@best-4all.com)

Position applying for: Date of Birth: **/ /**

Name: *first* *m.i.* *last*

**Residential Address:**

Street city state zip

Contact phone number: ( ) Alternate contact number: ( )

**Education**

Highest level of education (and location):

**Experience**

Starting with current or most recent employment

Job Title: Date started: to:

Employer: Supervisor name:

May we contact supervisor? Employer Contact Number: ( )

Job Description & Duties:

Reason for leaving?

Job Title: Date started: to:

Employer: Supervisor name:

May we contact supervisor? Employer Contact Number: ( )

Job Description & Duties:

Reason for leaving?

Job Title: Date started: to:

Employer: Supervisor name:

May we contact supervisor? Employer Contact Number: ( )

Job Description & Duties:

Reason for leaving?

**Additional Skills and Information that may help us evaluate your qualifications including classes, training, machinery, workshops or specialized skills:**

**Do you have a Louisiana Driver’s License?** **Driver’s License No:**

**Do you have a clear driving record?**  **If no, explain:**

**Are you willing to work weekends and after hours?**

**Are you able to work outdoors in the heat or cold climates?**

**Are you legally eligible to work for employment in the U.S.?**

**Have you ever been convicted of any violation(s) of law including misdemeanor(s) and felony(s)?**

**If yes, explain & list conviction, and date of charge:**

**Are you willing and able to pass a physical exam and drug screening prior to employment?**

**When will be available to start work?** **Salary requested:**

**References:**

Name:

Address:

Occupation/Title:

Phone Number:

Name:

Address:

Occupation/Title:

Phone Number:

Name:

Address:

Occupation/Title:

Phone Number:

I hereby certify that all entries on pages of this application and/or attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of the Blanchard Equipment Service Technicians, LLC team. I understand that all information on this application is subject to verification and I consent to criminal history background checks and driving record checks. I also consent that you may contact my references, former employers and educational institutions listed regarding this application. I further authorized Blanchard Equipment Service Technicians, LLC to rely upon and use, as it sees fit, any information received from such contacts.

Signature Date

Print name