O'Callaghan Cable Services, INC

Outside Plant Professionals

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Employment Application

			Арр	licant	Inform	ation				
Full Name:	Last	First				M.I.	Date:			
Address:	ress: Street Address					Apartm	ent/Unit #			
	City						State	ZIP Co	de	
Phone:					Email					
Date Available: Social Security No.:_				y No.:	Desired Salary:					
Position App	olied for:									
Emergency	contact:									
Are you a ci	itizen of the United Sta	ates?	YES	NO □ If	no, are	you aut	horized to work ir	the U.S.?	YES	NO
	e a valid US Driver's L		YES YES	□ n NO	icense umber/S yes, wh	_				
Have you ev	ver been convicted of	a felony?	YES	NO						
If yes, expla	iin:									
				Educ	ation					
High Schoo	l:			Address	<u> </u>					
From:	To:	Did	l you g	raduate	YES	NO	Diploma:			
Other:				Address						
From:	To:			raduate?	YES	NO	Degree:			

References						
Please list	three professional references.					
Full Name:		Relationship:				
Company:				Phone:		
Address:						
Full Name:				Relationship:		
Company:				Phone:		
Address:						
Full Name:				Relationship:		
Company:				Phone:		
Address:						
	Previous E	mployme	ent			
Company:				Phone:		
Address:						
Job Title:	Starting Sa			5 " O		
Responsibil	ities:					
From:	To:	Reason for Leaving:				
May we con	stact your previous supervisor for a reference?	YES	NO			
0				Dhara		
Company: Address:				_ Phone:		
Address.				Supervisor:		
Job Title:	Starting Sa	Starting Salary:				
Responsibil	ities:					
From:	To:	Reason f	or Leaving	I:		
May we con	stact your previous supervisor for a reference?	YES	NO			

Military Service					
Branch:	From:	To:			
Rank at Discharge: Type of Discharge:					
If other than honorable, explain:					
Disclaimer and Signature					
I certify that my answers are true and complete to the best of my knowledge.					
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.					
Signature:	Da	te:			