



OPTECH

Application for Employment

- Full-time
- Part-time
- Summer
- Internship

NOTE: ALL EMPLOYEES MUST BE ABLE TO BE LICENSED BY THE VIRGINIA DEPT OF CRIMINAL JUSTICE.

Date	Position(s) Sought
Name of Educational Institution	Salary Desired

General Information

First Name		Last Name	
Address until	No. Street	Tel.	
	City Province/State	Postal Code	E-mail
Permanent Address (if different from above)	No. Street	Tel.	
	City Province/State	Postal Code	E-mail

Are you employed? May we inquire of your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you ever applied to this company? Yes <input type="checkbox"/> No <input type="checkbox"/>
When are you available to start work?	When?
	Referred by

Education

Name and Location of School Begin with most recent.	Years Attended	Discipline or Program (Major)	Degree/Diploma/Certificate	Date obtained or expected

Highlight skills relevant to the position(s) sought.

Please check all industry certifications that apply and date obtained

<input type="checkbox"/> NSCA C-SI™	<input type="checkbox"/> BICSI Installer I	<input type="checkbox"/> NICET Audio	<input type="checkbox"/> CEDIA Designer I	<input type="checkbox"/> Other _____
<input type="checkbox"/> NSCA C-EST™	<input type="checkbox"/> BICSI Installer II	<input type="checkbox"/> NICET Fire	<input type="checkbox"/> Microsoft	<input type="checkbox"/> Other _____
<input type="checkbox"/> NSCA R-ESI™	<input type="checkbox"/> BICSI Technician	<input type="checkbox"/> CEDIA Installer I	<input type="checkbox"/> Novell	<input type="checkbox"/> Other _____
<input type="checkbox"/> BICSI RCDD	<input type="checkbox"/> ICIA CTS	<input type="checkbox"/> CEDIA Installer II	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

References

Name of Reference	Address	City, State, Zip	Phone	Years Known

Educational Experiences and Accomplishments

Describe your relevant courses, manufacturer training/certifications.

Work Experience

Describe all work experience (paid and unpaid) starting with most recent.

Position City Duties: Salary: Reason for leaving:	Name of Organization Province/State Dates Duties: Salary: Reason for leaving:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time (# of hours/wk) <input type="checkbox"/> Summer <input type="checkbox"/> Internship <input type="checkbox"/> Other: (specify)
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Summary

Demonstrate your suitability for position(s) sought, by outlining your career objectives and elaborating on the factual material already presented. Show how your experience (educational, extracurricular and work) is relevant to the position(s), organization, and/or field of work for which you are applying.

I understand that any omission or misrepresentation with respect to this information may be cause for denial or immediate termination of employment.

Date

Signature