

Independent Roofing Company Application for At-Will Employment

This application is no an employment contract, but merely is intended to evaluate suitability for employment. It is the policy of Independent Roofing Company to provide equal employment to all qualified persons without discrimination on basis of sex, race, color, religion, age, marital status, national origin, genetic history, citizenship, disability, military service, or any other status protected under local, state or federal law. It is also the policy of Independent Roofing Company to have the option of conducting pre-employment screening before a job offer is made. If a job offer is made, employment may be contingent upon successful completion of a medical examination, which may include providing a body substance sample. This application will remain active for 180 days.

Personal Information

Last Name	First Name	Social Security # - -
Present Address		City, State, Zip Code
Best Phone Number		Referred By

Employment Desired

Position Applying for	Date You Can Start	Salary Desired
Are you currently Employed?	If so, may we contact Your current employer?	
Have you ever applied At this company before?	If so, When?	
Please Answer the Following Question. When necessary, not question number and use an extra paper to provide explanation.		
1.) Are you at least 18 years of age and legally eligible for work and the United States? <input type="checkbox"/> YES <input type="checkbox"/> NO		
2.) Are you willing to work overtime when necessary? <input type="checkbox"/> YES <input type="checkbox"/> NO		
3.) Have you received a description of the job or been made aware of the essential functions of the job you're applying for? <input type="checkbox"/> YES <input type="checkbox"/> NO		
4.) Do you understand the job requirements? <input type="checkbox"/> YES <input type="checkbox"/> NO (If no, please explain)		
5.) Are you on layoff and subject to recall? <input type="checkbox"/> YES <input type="checkbox"/> NO		
6.) Are you currently bound by a noncompetition, non-solicitation or trade agreement? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain)		
7.) Have you ever been discharged or asked to resign from a job? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain)		

Education

High School	City, State	Did you Graduate?	Areas of Study
Undergraduate	City, State	Did you Graduate?	Areas of Study
Graduate	City, State	Did you Graduate?	Areas of Study
Trade, Business or Other	City, State	Did you Graduate?	Areas of Study

Former Employers

(List below, starting with most resent first)

Dates From/To	Name of Employer	City, State	Pay Rate	Position Held	Reason for Leaving
Dates From/To	Name of Employer	City, State	Pay Rate	Position Held	Reason for Leaving
Dates From/To	Name of Employer	City, State	Pay Rate	Position Held	Reason for Leaving

References

Give below the Names of Three Persons, not related to you, whom you have known at least one year.

Name	Phone Number	Relationship	Years Known
Name	Phone Number	Relationship	Years Known
Name	Phone Number	Relationship	Years Known

Job Related Skills

Please answer the following questions if the position you are applying for requires driving a motor vehicle:

- Do you have a valid Driver's License? YES NO (If yes, State of Issue _____, Date of issue _____)
- Have you ever had your driver's license suspended or revoked or had your driving privileges modified by a court of law? YES NO
- Please list all states from which you hold or have held a Driver's License:

Please use this space to list any special skills you may have that relate to the position applied for:

Please list any professional licenses, designations, certifications, etc. that may relate to the position applied for. Include date granted, name of organization and any other relevant information.

Applicant's Certification Agreement

1. I authorize the investigation of all statements contained in the application and release all liability any persons or employers supplying such information, and also release the company from all liability that might result from making the investigation.
2. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of facts on this application (or on any other required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
3. I agree, if I am offered and accept a position, to conform to all existing and future Independent Roofing company rules and regulations and I understand that Independent Roofing Company reserves the right to change wages, hours and working conditions as necessary. I ALSO UNDERSTAND THAT IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANTING THAT EITHER PARTY CAN END THE EMPLOYEMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.
4. I understand that any employment offer is contingent upon my providing, within 3 working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.
5. I have read and reviewed the information provided on this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Signature

Date

WE ARE AN AT WILL, EQUAL OPPORTUNITY EMPLOYER – WE PARTICIPATE IN E-VERIFY