

## EMPLOYMENT APPLICATION

**OKLAHOMA ROOFING & SHEET METAL, LLC** is an equal opportunity employer and considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, sexual orientation, disability, marital or veteran status, or any other status protected under local, state or federal laws.

Position(s) applied for:	Date of Application:
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Last Name	First Name	Middle Initial
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Street Address	City	State
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Telephone Number(s)	Social Security # (Voluntary) and other name(s) records might be listed under
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E-Mail	Best Time To Reach You:
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**Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.**

*Oklahoma Roofing & Sheet Metal will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's form I-9 to confirm work authorization.*

Are you legally eligible to work in the United States \_\_\_ Yes \_\_\_ No  
*(Proof of eligibility will be required upon offer of employment)*

Are you over 18 years of age? \_\_\_ Yes \_\_\_ No

Can you perform the essential functions of this job without reasonable accommodation? \_\_\_ Yes \_\_\_ No  
*(If you have any questions about the functions of this job, please ask the interviewer before answering this question)*

Have you ever filed an application with us before? \_\_\_ Yes \_\_\_ No  
 If yes, give date(s): \_\_\_\_\_

Have you ever been employed with us before? \_\_\_ Yes \_\_\_ No  
 If yes, give date(s): \_\_\_\_\_

Are you related to anyone employed by Oklahoma Roofing & Sheet Metal, LLC? \_\_\_ Yes \_\_\_ No  
 If yes, state name and relationship: \_\_\_\_\_

Date Available to Work:	Desired Salary Range:
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Desired Status (Check one):  Full Time  Part Time  Temporary/Internship

Days and Hours Available:

Day	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
AM							
PM							

Are you currently employed? \_\_\_ Yes \_\_\_ No

May we contact your present employer? \_\_\_ Yes \_\_\_ No

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Are you on "lay-off" status and subject to recall? \_\_\_ Yes \_\_\_ No

Have you ever been convicted of a felony? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_

*(A conviction will not necessarily disqualify you)*

Can you travel if the job requires it? (Requirement for job) \_\_\_ Yes \_\_\_ No

Do you have a US Passport? \_\_\_ Yes \_\_\_ No

*(Now required for all Federal prevailing wage jobs)*

Do you have a valid driver's license? \_\_\_ Yes \_\_\_ No

If yes, please provide number: \_\_\_\_\_ State \_\_\_\_\_

Have you been convicted of any moving violations in the past five years? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_

*(A conviction will not necessarily disqualify you)*

Have you ever been fired from or asked to resign from a job? \_\_\_ Yes \_\_\_ No

If yes, please explain: \_\_\_\_\_

*(Answering yes will not necessarily disqualify you.)*

### EDUCATION

School	Name & Town of School	Course of Study	# of Years Completed
High School			
Undergraduate			
Graduate/Other			

Please list any academic honors, scholarships, offices held, etc. *(Please do not list any which reflect your race, color, religion, gender, national origin, age, or any items covered in Title VII of the Civil Rights Act)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please describe any specialized training, apprenticeships, licenses or skills, including computer skills.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you received any job-related training in the United States Military? <i>If yes, please give dates and explanations below.</i>	___ Yes ___ No
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\_\_\_\_\_  
 \_\_\_\_\_

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### WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, sexual orientation, disabilities or other protected status. Please attach another page if needed.

Dates Employed:	From:	To:	WORK PERFORMED (Use this entire column if necessary)
Employer:			
Address:			
Telephone Number(s)			
Job Title:			
Supervisor:			
Reason For Leaving:			
Salary:	Start	Finish:	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed:	From:	To:	WORK PERFORMED (Use this entire column if necessary)
Employer:			
Address:			
Telephone Number(s)			
Job Title:			
Supervisor:			
Reason For Leaving:			
Salary:	Start	Finish:	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates Employed:	From:	To:	WORK PERFORMED (Use this entire column if necessary)
Employer:			
Address:			
Telephone Number(s)			
Job Title:			
Supervisor:			
Reason For Leaving:			
Salary:	Start	Finish:	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No

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## APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

**\*PLEASE READ CAREFULLY BEFORE SIGNING\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by OKLAHOMA ROOFING & SHEET METAL, LLC (hereinafter referred to as OR&SM) that such employment with OR&SM is at will, for no specified duration and may be terminated by either OR&SM or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of OR&SM or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of OR&SM except the CEO or President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the CEO or President of OR&SM.

In consideration for employment with OR&SM, if employed, I agree to conform to the rules, regulations, policies and procedures of OR&SM at all times and understand that such obedience is a condition of employment. I understand that due to the nature of OR&SM's business, attendance and punctuality are considered essential requirements of every job at OR&SM and that poor attendance or tardiness will result in disciplinary action.

I authorize OR&SM to investigate my financial and credit record through any consumer reporting agency or bureau of its choice, and further to make an investigation of my personal history including, if any, a record of law enforcement activity, my character and general reputation. I understand that the company, upon my written request, will disclose the nature and scope of any credit investigation. If this application is denied either wholly or partly because of information contained in a consumer report from a consumer reporting agency, I understand that the company shall advise me and provide me with the name and address of the consumer agency making the report.

I understand that if offered a position with OR&SM, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to OR&SM and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Name and number of person(s) completing this form if other than applicant: \_\_\_\_\_  
\_\_\_\_\_