ERECTORS PLUS, INC
APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including: race, religion, disability, or national origin. Consistent with the American disabilities Act, applicants may request accommodations needed to participate in the application process.

PERSONAL INFORMATION

Date: _____ Social Security No: _____

Name: _____
Last First Middle

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Phone No: _____ Height: _____ Weight: _____

Referred By: _____ Are You 18 Years Old Or Older ? _____ Yes _____ No

EMPLOYMENT DESIRED:

Position: _____ Date You Can Start: _____ Salary Desired: _____

Are You Employed Now ? _____ Yes _____ No If So, May We Inquire Of Your Present Employer ? _____ Yes _____ No

Have You Ever Applied To This Company Before ? _____ Yes _____ No When ? _____ Date

EDUCATION:

	Name & Location	Circle Last Year Completed	Subjects Studied & Degree(s) Received
High School:		Last Year Completed: _____ 1 - 2 - 3 - 4	
		Did You Graduate ? _____ Yes _____ No	
College:		Last Year Completed: _____ 1 - 2 - 3 - 4	
		Did You Graduate ? _____ Yes _____ No	
Trade, Business or Correspondence Courses:		Last Year Completed: _____ 1 - 2 - 3 - 4	
		Did You Graduate ? _____ Yes _____ No	

GENERAL:

Can you produce documented proof of your eligibility for employment in the United States ?

Yes ____ No ____

(Either Driver's License and Social Security Card / Birth Certificate / Immigration and Naturalization Services Documents)

Have you ever been convicted of a crime, except a minor traffic violation ?

Yes ____ No ____

If so, provide the following:

Date ____ Court ____ Place Of Offense ____

Do You Have A Current Valid Driver's License ?

Yes ____ No ____ State ____

Do You Have A Current Valid CDL License ?

Yes ____ No ____ State ____

FORMER EMPLOYERS:

(List Below Your Last Four Employers, Starting With The Last One First)

From ____ Name Of Employer ____ Address Of Employer ____

To ____ Position ____ Reason For Leaving ____

Job Duties ____ Salary Upon Leaving ____

From ____ Name Of Employer ____ Address Of Employer ____

To ____ Position ____ Reason For Leaving ____

Job Duties ____ Salary Upon Leaving ____

From ____ Name Of Employer ____ Address Of Employer ____

To ____ Position ____ Reason For Leaving ____

Job Duties ____ Salary Upon Leaving ____

From ____ Name Of Employer ____ Address Of Employer ____

To ____ Position ____ Reason For Leaving ____

Job Duties ____ Salary Upon Leaving ____

REFERENCES:

1) _____
Name | Address | Position | Yrs. Acquainted

2) _____
Name | Address | Position | Yrs. Acquainted

3) _____
Name | Address | Position | Yrs. Acquainted

4) _____
Name | Address | Position | Yrs. Acquainted

PHYSICAL RECORD:

1) Do you or are you taking illegal narcotics such as marijuana, cocaine, LSD, etc. ? _____ Yes _____ No

2) Are you taking any prescription drugs which may affect your ability to perform your work ? _____ Yes _____ No

3) Are you aware that a drug test is required prior to employment with Erectors Plus, Inc. and post accident or random testing? _____ Yes _____ No

4) Do you have any physical limitations which may affect your performance of the position you are seeking ? _____ Yes _____ No

5) Are you aware that some of the work requires heavy lifting ? _____ Yes _____ No

6) Do you have any back problems ? If so please explain: _____ Yes _____ No

_____

EXPERIENCE, ABILITIES, ETC.:

1) Can you read plans and blue prints ? ……. _____ Yes _____ No

2) Do you have skills in the work we perform ? …….. _____ Yes _____ No

3) Can you weld ? …….. _____ Yes _____ No

4) Are you a certified welder ? …… _____ Yes _____ No

5) Do you think you have the ability to be certified ? ……. _____ Yes _____ No

6) Do you have experience in erecting/connecting steel ? …… _____ Yes _____ No

7) Do you have experience installing metal wall and roof panels ? …… _____ Yes _____ No

8) Have you worked on metal standing seam roofs ? ……. _____ Yes _____ No

9) Can you use a torch to cut steel ? ……. _____ Yes _____ No

10) Do you have experience in running heavy equipment ? ……. _____ Yes _____ No

Forklift ? _____ Boom Type ? _____ Other ? _____

11) Do you have any steel fabrication experience ? …… _____ Yes _____ No

12) Are you aware of OSHA requirements in our field ? …… _____ Yes _____ No

13) Are you safety conscious ? …….…….. _____ Yes _____ No

14) Are you able to work well with others ? …… _____ Yes _____ No

15) Do you ask questions when you do not understand or are not sure ? …….. _____ Yes _____ No

16) Do you have your own dependable means of transportation ? …….. _____ Yes _____ No

17) Are you afraid of heights ? ……. _____ Yes _____ No

How high have you worked ? _____

18) Are you dependable ? ……. _____ Yes _____ No

19) Do you have experience in quarry work ? …… _____ Yes _____ No

20) Do you have experience in rigging and/or heavy equipment moving ? ……. _____ Yes _____ No

21a) Are you aware of MSHA requirements in our field ? …….. _____ Yes _____ No

21b) What is the expiration date on your MSHA card ? _____/_____/_____

22) Do you have any framing experience ? ……. _____ Yes _____ No

Wood ? _____ Metal ? _____`

23) Do you have any drywall experience ? …….. _____ Yes _____ No

Hanging ? _____ Taping ? _____ Finishing ? _____

24) Do you have Acoustic Ceiling Tile (A.C.T.) experience ? …….. _____ Yes _____ No

25) Do you have experience installing, hanging, and settingdoors ? …… _____ _____

26) Do you have any experience in concrete work ? …….. _____ Yes _____ No

Please list all equipment and power tools which you are capable of operating and have experience using:

_____

_____

_____

_____

_____

_____

_____

JOB APPLICANT'S AGREEMENT AND CERTIFICATION:

I certify that the information given by me in this application is true in all respects. I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damage on account of having furnished such information.

I agree to submit to a drug test whenever requested. I understand my becoming employed and/or my continued employment are subject to my successfully passing any drug test in accordance with company policies and procedures.

I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures, in whole or in part, at any time.

I understand that this application will be kept on active file for _____ days from the date completed, after which time I will have to reapply in accordance with established company procedures.

Signature Of Applicant _____ Date _____

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Interview By _____ Date _____

Interview By _____ Date _____

Remarks: _____

Hire Date _____ Position _____ Start Date _____

Starting Wage _____ Hired By _____