

# Application For Employment



1924 N. Elm Street, Muncie IN 47303 (765) 288-8881 Fax (765) 288-9551

Advanced Commercial Roofing appreciates your interest in our company as a place of employment. It is our Company's policy to employ, retain, promote, terminate, and otherwise treat all employees and job applicants without regard to any individual's race, religion, color, sex, national origin, marital status, sexual orientation, veteran status, or disability.

(PLEASE PRINT)

## GENERAL

## Date of Application

Name(Last) _____ (First) _____ (Middle) _____	Social Security Number _____
Current Address _____	Telephone Number _____ ( )
City, State & Zip _____	Alternate Telephone Number _____ ( )
Emergency Contact Name _____	Emergency Contact Telephone Number _____ ( )
Position(s) Applied For _____	E-Mail _____

How Did You Hear About Us?

- Advertisement       Friend       Walk In  
 Employment Agency       Relative       Other \_\_\_\_\_

Employment Desired	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time	<input type="checkbox"/> Temporary	<input type="checkbox"/> Hours/Days Available _____
Are you willing to travel?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If Applying for a position in which you travel, do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you currently employed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If not, can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you 18 years of age or older?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you filled an application with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No   If Yes, give date _____	
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment</i> <input type="checkbox"/> Yes <input type="checkbox"/> No				
On what date would you be available for work?		Are you currently on a "lay-off" status and subject to recall? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of any criminal offences other than minor traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No (For purposes of this question, convictions for driving while under the influence, driving while intoxicated, or other similar offences involving substance abuse shall NOT be considered minor traffic violations and must be listed below)				
(Where) _____	(When) _____	(Offense) _____		
County	State	Month/Year		
(Disclosure of a criminal record will not necessarily disqualify you for employment consideration. Each conviction will be evaluated on its own merits with respect to time, circumstances and seriousness, in relation to the job for which you are applying. However, failure to disclose such information may result in a disqualification of your application or termination of employment.)				

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

**Begin with your present or most recent employment. Account for all work history including part-time, temporary, military service, and self-employment. Failure to fully and accurately complete the information required below may delay or prevent employment consideration or subject you to discharge in the event you are hired.**

**EMPLOYMENT HISTORY**

Employer	Supervisor	May we Contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Address	Employer Phone	Employed Dates	From:	To:
City, State, Zip		Salary	Starting:	Final:
Position title and Description of Job Duties		Reason for Leaving		
Employer	Supervisor	May we Contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Address	Employer Phone	Employed Dates	From:	To:
City, State, Zip		Salary	Starting:	Final:
Position Title and Description of Job Duties		Reason for Leaving		
Employer	Supervisor	May we Contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Address	Employer Phone	Employed Dates	From:	To:
City, State, Zip		Salary	Starting:	Final:
Position title and Description of Job Duties		Reason for Leaving		

**ADDITIONAL EMPLOYMENT**

Name and Address of Employer	Date Employed	From:	To:	Job Title:	Reason for Leaving

If you need additional space, please continue on a separate sheet of paper.

## EDUCATION

Name of School or Institution	Address	Graduated	Major	Degree/Cert
High School		<input type="checkbox"/> Yes <input type="checkbox"/> GED <input type="checkbox"/> No		
Vocational School		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Graduate School		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Scholastic Societies, Honors, Certifications, Offices Held				

## SPECIAL SKILLS OR TRAINING

Type	Level	
Software	_____	Typing _____ wpm
Hardware	_____	Shorthand _____ wpm
Terminal Entry	_____	10-Key _____ wpm
What foreign languages do you	Speak? _____	Read? _____
		Write? _____
DOT Certification		

## MILITARY SERVICE

Branch of U.S. Military Service	Rank at Discharge
Dates Served	From: _____ To: _____
Brief description of military duties in the service:	
Special Train or Awards:	

## EMPLOYMENT REFERENCES

Business acquaintances other than immediate supervisors who are qualified to comment on your ability and experience. (IN most cases, these references will be contacted by Advanced Commercial Roofing. Do not list any person you do not want us to contact)

Name:	Title:	Phone
Company:	Address:	
Name:	Title:	Phone
Company:	Address:	
Name:	Title:	Phone
Company:	Address:	

**INFORMATION RELEASE WAIVER AND INDEMNITY (READ CAREFULLY BEFORE SIGNING)**

As an applicant for a position with Advanced Commercial Roofing, I realize that a thorough background investigation may be conducted to qualify me for employment. I hereby authorize Advanced Commercial Roofing to conduct an investigation concerning all statements in my application for employment. I understand and agree that this background investigation may include but is not limited to, interviews with and requests for information from all former employers and employment references and from any education institutions I have attended or I am attending, a check with duly constituted law enforcement agencies and/or judicial officers regarding criminal convictions pertaining to me, and requests for information regarding my driving record. I hereby authorize the release of any information related to my previous employment, criminal convictions, education, driving record, residence, or character, unless such information is restricted by law. I understand that only such information as is pertinent to the position for which I have applied shall be considered. I request that this document serve as my authorization to any persons, companies, their employees, offices, and agents, and any such person, company, government agency, or other entity from any liability arising directly or indirectly from the disclosure of any such information obtained in connection with such investigations. I request any duly constituted law enforcement agency or judicial officer to furnish Advanced Commercial Roofing with all the information pertaining to me concerning arrests for which convictions were obtained, and I hereby release Advanced Commercial Roofing and such law enforcement agency, judicial officer, or other individual from any liability arising from disclosure of the information obtained during such an investigation. I agree to indemnify and hold harmless Advanced Commercial Roofing, all of its affiliated companies, and their employees, officers and agents for all costs, damages, lawsuit or administrative proceeding brought against Advanced Commercial Roofing, and of its affiliated companies, or their employees, officers or agents which are related directly or indirectly to the disclosure of any such information or to such investigations.

I agree to furnish any additional information and/or submit to any applicable, job related and or written examinations or testing. I agree to submit to a pre-employment drug screen, and pre-employment processing, as may be required to complete the employment file.

It is agreed and understood that this application for employment does not obligate Advanced Commercial Roofing to employ me.

In consideration of my employment, I agree to conform to the rules and regulations of Advanced Commercial Roofing and I understand and agree that my employment will be for no definite period of time and that my employment can be terminated, with or without cause, and with or without notice at any time at the option of either Advanced Commercial Roofing or myself. I understand that no manager or representative of Advanced Commercial Roofing other than the President of Advanced Commercial Roofing has any authority to enter into any permanent agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only if the agreement is expressly set forth in a written document signed by myself and by the President of Advanced Commercial Roofing. The language of this paragraph shall supersede the language of any other document pertaining to my employment with Advanced Commercial Roofing. Any waiver of the language referred to in this paragraph must set forth this paragraph and indicate that its language is specifically waived. This agreement shall supersede all previous agreements or understandings, written or oral, by and between me and Advanced Commercial Roofing and shall be effective on which I commence employment with Advanced Commercial Roofing.

Full Name: \_\_\_\_\_ Other Names Known By: \_\_\_\_\_

Current Address: \_\_\_\_\_ Driver's License Number/State: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Telephone: \_\_\_\_\_ Date of Birth\*: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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\*Date of birth is necessary to verify criminal and driving history

(Note: The Age Discrimination in Employment act of 1967, as amended prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age)

Have you entered into any restrictive, non-compete agreement, or non-disclosure agreement entered into with your current or any former employer that would restrict you from performing an duties of the position(s) for which you are applying with Advanced commercial Roofing Systems, Inc.?

Yes     No

If yes explain: \_\_\_\_\_

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**CERTIFICATION**

**(READ CAREFULLY BEFORE SIGNING)**

**I certify that any an all statements which I have set forth in this application are true and correct to the best of my knowledge. I also recognize that any misstatement or omission of facts call for in this application, in an supplement thereto, or in any other company records supplied or completed by me will be sufficient grounds for not employing me or may subject me to discharge in the event that I am hired. I further understand that my continued employment may be contingent upon obtaining a proper security clearance, if necessary and satisfactory passing a prescribed physical examination, if necessary.**

SIGNATURE (IN INK)

DATE

Your interest in employment with Advanced Commercial Roofing Systems, Inc. is sincerely appreciated. Please feel free to attach to this application any additional information which you feel will be helpful in evaluating your qualifications.

# **ADVANCED**

## **COMMERCIAL ROOFING**

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Advanced Commercial Roofing is committed to maintaining a safe, healthful and efficient working environment for all of its employees. To assist in accomplishing this goal, Advanced Commercial Roofing has a Substance Abuse Policy which outlines certain procedures that must be followed when considering applicants for available openings.

The Policy requires that applicants being considered for employment will undergo a pre-employment drug screen. Applicants refusing to undergo the screen will not be considered for employment. Results of the drug screen will be evaluated along with qualifications in determining the best candidate for the available position.

Any Information generated as a result of an individual's drug screen will be held in the strictest confidence. The only information permitted in the company files will be that information which is necessary for administrative purposes

### **OVER-THECOUNTER AND PRESCRIPTION DRUGS WHICH COULD ALTER OR AFFECT THE OUTCOME OF A DRUG TEST**

#### ALCOHOL

All liquid medications containing ethyl alcohol (ethanol). Please read the label for alcohol content.

#### AMPHETAMINES

Obetrol, Biphphetamine, Desoxyn, Dexedrine, Didrex

#### CANNABINOIDS

Marinol (Dronabinol, THC)

#### COCAINE

Cocaine HCL topical solution (Roxanne)

#### PHENCYCLINDINE

Not legal by prescription

#### METHOQUALONE

Not legal by prescription

#### OPIATES

Paregoric, Parepectolin, Donnagel PG, Morphine, Tylenol with Codeine, Emprin with Codeine, APAP with Codeine, Aspirin with Codeine, Robitussin AC, Guiatuss AC, Novahistine DH, Novahistine Expectorant, Dilaudid (Hydromorphone), M-S Contin and Roxanol (morphine sulfate), Percodan, Vicodin, etc.

#### BARBITURATES

Phenobarbital, Tuinal, Amytal, Nembutal, Seconal, Lotusate, Fiorinal, Fioricet, Esgic, Butisol, Mebaral, Butabarbital, Betabital, Phrenilin, Triad, etc.

#### BENZODIAZEPINES

Ativan, Azene, Clonopin, Dalmane, Diazepam, Librium, Xanax, Serax, Tranxene, Valium, Berstran, Halcion, Paxipam, Restoril, Centrax.