

American Roofing Application for Employment

Applicant Note

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. If employment is offered, it is strictly on an "at will" basis, which means that you may resign at any time, or American Roofing may terminate your employment at any time for no reason, or for any reason not prohibited by law. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of disabilities. A felony conviction will not necessarily bar an applicant from employment. Affirmative action hiring may be requested by qualified applicants. Additional testing of job-related skills and for the presence of drugs on your body may be required prior to employment. After an offer of employment, and prior to reporting to work, you are required to submit to a medical review. Depending on company policy and the needs of the job, you will be required to complete a medical history form and may be required to be examined by a medical professional designated by the company.

American Roofing is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, veteran status, or any other legally protected status.

General Information

Name		Social Security Number	
Address		Home Phone	
City, State, ZIP		Work Phone	
Emergency Contact		Phone	
Prior Address		Have you applied at American Roofing before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Priory City, State, ZIP		Who referred you to American Roofing?	

Availability

Position applied for:		Requested rate of pay:	
<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		Date available to work:	

Education

Level of Education	Name of School	From Year	To Year	Did you graduate	List Degrees
High School				<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	
Other (Specify)				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Employment

Employer	Supervisor	From Year / To Year	Position / Salary	Describe your job responsibilities
Employer Name Address	Name Phone	From _____ To _____	Position: Salary:	
Employer Name Address	Name Phone	From _____ To _____	Position: Salary:	
Employer Name Address	Name Phone	From _____ To _____	Position: Salary:	

Job Skills

Drivers License Number:		State of Issue:		Is your license currently valid?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Type of License:		Endorsements:		Restrictions:	
Moving violations in the last 3 years:		Do you have other skills, licenses, or certificates that are job-related?			
Have you been given a job description or had the requirements of the job explained to you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Do you understand these requirements?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Can you perform the requirements of the job with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No				

Security

List all countries and states of residence of the past seven years:	
Have you used another name or Social Security Number, other than those listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, list all:
Have you been convicted of a felony and/or served time for a felony within the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so, please give details (incident, locations, change):

