

Notice to Applicants: Some positions require a physical examination, which includes a drug test in compliance with U.S. Department of Transportation regulations.



Application for Employment

Applicants for employment are considered without regard to race, color, religion, sex, sexual orientation, marital status, veteran's status, national origin, age, mental or physical disability. Also, it is unlawful in some states to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

(PLEASE PRINT)

Date of Application _____

Position (s) Applied For _____

Referral Source _____

Name _____

LAST

FIRST

MIDDLE

Address _____

NUMBER

STREET

CITY

STATE

ZIP CODE

Telephone () _____ Social Security No. _____

Address for _____ How Long? _____

STREET

CITY

STATE & ZIP CODE

Are you under 18? Yes No

If employed and you are under 18, can you furnish a work permit? Yes No

Are you over 21? (If applying for driver or mechanic position.) Yes No

Have you ever filed an application with this company before? Yes No

If Yes, give date _____

Have you ever been employed with this company before? Yes No

If Yes, give date _____

Are you presently authorized to work in the U.S.? Yes No

(Proof of citizenship or immigration status is required upon employment.)

On what date would you be available for work? _____

Are you available to work Full Time Part Time Shift Work Temporary
 Over Time

Can you travel if the job requires it? Yes No

Are you a Veteran of the U.S. military service? Yes No

If Yes, List Branch: _____

Please describe any special skills or training acquired while in the service: _____

AN EQUAL OPPORTUNITY EMPLOYER

Employment History

All applicants must complete employment information below, even if providing a resume.

Please provide information for the past 10 years.

Note: List all employers in reverse order starting with the most recent. Add another sheet as necessary.

EMPLOYER	From Date:
Name:	To Date:
Address:	Position:
City: State: Zip:	Salary/Wage:
Contact/Title: Phone:	Reason for Leaving:
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYER	From Date:
Name:	To Date:
Address:	Position:
City: State: Zip:	Salary/Wage:
Contact/Title: Phone:	Reason for Leaving:
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYER	From Date:
Name:	To Date:
Address:	Position:
City: State: Zip:	Salary/Wage:
Contact/Title: Phone:	Reason for Leaving:
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYER	From Date:
Name:	To Date:
Address:	Position:
City: State: Zip:	Salary/Wage:
Contact/Title: Phone:	Reason for Leaving:
May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

Education	Elementary	High	College/University	Graduate/Professional
Name of School				
Circle Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				
Honors Received:				

References

Please furnish 3 references (at least 2 professional):

Name: _____ Phone Number: _____
 Name: _____ Phone Number: _____
 Name: _____ Phone Number: _____

ALL APPLICANTS MUST READ AND SIGN BELOW

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or a promise of future benefits by Pierce Aluminum. I understand and agree that if hired, my employment will be at-will and may be terminated, with or without cause, at any time, by either myself or my employer. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of Pierce Aluminum.

I certify that the information given on this application is true, complete, and correct. I understand that should any statement I have made prove false, misleading, erroneous, incorrect, incomplete, or there are omissions, my application for employment may be rejected, or if employed, I may be discharged immediately.

I hereby authorize Pierce Aluminum, its corporate affiliates, its employees, its authorized agents and representatives to verify all information contained in this application and to inquire into my character, general reputation, personal characteristics and mode of living. I understand that this background investigation may include the checking of sources such as credit information, driving records, professional licensing authorities, educational institutions, previous employers (including alcohol and controlled substances testing, and federal, state, and county criminal history records).

I hereby release Pierce Aluminum, its corporate affiliates, its employees, its authorized agents and representatives and all others involved in this background investigation from any liability in connection with any information they give or gather and any decisions made concerning my employment based on such information. I understand that any offer of employment I may receive is contingent upon the successful completion of the background investigation. In the event of my employment, I understand that I am required to abide by all rules and regulations of the company.

For those employees operating Pierce Aluminum vehicles or heavy equipment, Pierce Aluminum may require a pre-employment drug test and/or physical. As a consideration of my employment, I agree to the urine sample collection and controlled substance testing. I understand a positive test for controlled substances based on the urinalysis test will disqualify me from employment with Pierce Aluminum. An independent third party will maintain the urinalysis. Negative and positive results will be reported to Pierce Aluminum. My written authorization will be required for the urinalysis test results to be given to any other parties. As a consideration of my employment, I agree to a pre-employment physical. If I fail the pre-employment physical, I understand this will disqualify me from employment with Pierce Aluminum.

I have read and understand the above conditions.

Applicant Signature

Date

Print Applicant Name

Social Security Number