Application for Employment

Have you ever gone by a name other than the one listed above?

Equal Employment Opportunity Statement:

Employment decisions will be based on the principles of equal opportunity. All personnel actions (recruiting, hiring, training, promotion, compensation, etc.) are administered without regard to any characteristic protected by state, federal or local law, assuming said characteristic does not interfere with the performance of essential job functions. Reasonable accommodations will be made for disabilities and religious beliefs. Please inform us of any necessary accommodations to the application process.

Please print. Applicant Name: First Middle City Address State Zip Email Address Telephone Number Position(s) Applied For Date of Application Salary Expected How did you learn about Exterior Solutions of Georgia, Inc. dba Bone Dry Roofing? ___ Employment Agency—Specify: ☐ Advertisement—Specify: __ Other—Specify: ☐ Employee Referral—Which employee? _____ Have you applied for a position with us before? No Yes—Specify date: _____ Have you ever been employed with us before? ☐ No ☐ Yes—Specify date and position: ______ Are you currently employed? ☐ No ☐ Yes Are you currently on "lay-off" status and subject to recall? ☐ No ☐ Yes On what date would you be available for work? _ ☐ Full-time ☐ Part-time ☐ All shifts ☐ Temporary Are you available to work: Can you travel for work if necessary? ☐ Yes Are you legally permitted to work in the United States? Yes NOTE: Proof of eligibility will be required within three working days of employment. Are you 18 years of age or older? \(\subseteq\) Yes Have you been convicted of a felony within the last 7 years? \Box ☐ Yes—Explain: ______ NOTE: Such conviction does not necessarily prevent you from employment. Exterior Solutions of Georgia, Inc. dba Bone Dry Roofing is an equal opportunity employer. Are you willing to take drug tests at the Company's request? Yes

☐ No ☐ Yes—Please list: ____

EDUCATION

Please circle highest grade completed. 7 8 9 10 11 12 13 14 15 16 16+ List the last 3 schools attended.

Name I	City/State		Graduated	Degree
High School			☐ Yes ☐	No
College			-	
Other				
	1			
E	EMPLOYN	MENT HISTO	ORY	
Employer		Supervisor		
Address		Phone		
Position Title and Duties				
	90			8
Starting Date Ending Date		Starting Pay	Endi	ng Pay
	*		2/	
Why did you leave this job?				
May we contact this employer? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	☐ No	☐ Later		
Employer		Supervisor		
Address		Phone		
Position Title and Duties				
Starting Date Ending Date		Starting Pay	Endi	ng Pa <u>y</u>
Why did you leave this job?			÷	
May we contact this employer? Yes	☐ No	Later		

Employer		Supervisor			
Address		Phone			
L Position Title and Duti	ies	ļ			
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Starting Date	Ending Date	Starting Pay	Ending Pay		
Why did you leave thi		□ N □ □ 1-25			
May we contact this e	mployer?	□ No □ Later	9		
		DEEDENGEG			
		REFERENCES			
Name	Pho	one Number	Years Known		
ADDITIONAL INFORMATION You may exclude information which would reveal sex, race, religion, national origin, age, color, disability, sexual orientation or other protected status. Awards or Honors Received:					
10					
Professional or Civic A	activities:				
Licenses or Certification	ons	ĕ¹			
Activities or Sports Yo	u Participate(d) In				
Do you have any forei	ign language skills?	No ☐ Yes—Specify:			
Can you perform all n	ecessary job functions w	vith or without reasonable	accommodation?		

APPLICANT'S STATEMENT

I certify that the information provided in this application is true, to the best of my knowledge.

I understand that providing false or misleading information at any time during the application and interview process may lead to refusal to hire or discharge from the Company. If I become employed by the Company, I agree to follow all rules and regulations of the Company as they develop and change.

I allow the Company to conduct investigations on me, my background and my performance, and am aware that such investigations will become a part of my employment record. With this, I authorize the Company to speak with my acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to the Company, and release them of liabilities and damages of all kinds for providing this information. I authorize the Company to verify the accuracy of the information within this application. I also authorize the release of my educational transcripts to the Company for education verification purposes.

I release Exterior Solutions of Georgia, Inc. dba Bone Dry Roofing from liability for collecting information about me and using it to make employment decisions.

If I become employed by the Company, I understand that the employment relationship will be "at will," and that the "at will" status may not change at any time unless specifically approved, in writing, by the CEO of the Company.

I agree that if I become indebted to the Company, I will be responsible for repaying the total owed upon termination from the Company. If I do not repay the sum prior to my final paycheck being received, the money owed will be deducted from my pay.

This application for employment is valid for the next 90 days. I understand that if I wish to be considered for employment after this period of time, I must apply again.

Signature of Applicant	Date