



## Employment Application

PLEASE PRINT

Date: \_\_\_\_\_

Personal Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever worked for Hy-Tech Roofing Services, Inc. before? ☐ Yes ☐ No If yes, when? \_\_\_\_\_

Are you 18 years or older? ☐ Yes ☐ No If no, do you have a worker's permit? ☐ Yes ☐ No

Are you a U.S. Citizen or do you have a *legal right* to be employed in the U.S? ☐ Yes ☐ No If yes, what type of permit? \_\_\_\_\_

Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, please explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentences(s) imposed, and type(s) of rehabilitation.

\_\_\_\_\_  
\_\_\_\_\_

MILITARY:

Have you ever been in the U.S. Armed Forces? ☐ Yes ☐ No If yes, what branch? \_\_\_\_\_

Are you currently a member of the National Guard? ☐ Yes ☐ No

Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

Type of Discharge \_\_\_\_\_ Specialty \_\_\_\_\_

EDUCATIONAL DATA:

Education/Training	Name of School & Address	Couse of Study	Years Completed (circle one)	Diploma / Degree (circle one)
Grammar School			5 <sup>th</sup> 6 <sup>th</sup> 7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup>	
High School			9 <sup>th</sup> 10 <sup>th</sup> 11 <sup>th</sup> 12 <sup>th</sup>	YES / NO
Business or Trade School			1yr 2yr 3yr 4yr	YES / NO
College			1yr 2yr 3yr 4yr	YES / NO
Other: Describe any other specialized or job related training, apprenticeship, skills, extra-curricular activities, training received in the United States military:				

**LANGUAGE:**

Indicate any language you can speak, read, and/or write along with your fluency in the language.

	<u>SPEAK</u>				<u>READ</u>				<u>WRITE</u>			
<u>Language</u>	<u>HIGH</u> <u>(Fluent)</u>	<u>MOD</u> <u>(Good)</u>	<u>LOW</u> <u>(Fair)</u>	<u>None</u>	<u>HIGH</u> <u>(Fluent)</u>	<u>MOD</u> <u>(Good)</u>	<u>LOW</u> <u>(Fair)</u>	<u>None</u>	<u>HIGH</u> <u>(Fluent)</u>	<u>MOD</u> <u>(Good)</u>	<u>LOW</u> <u>(Fair)</u>	<u>None</u>
English <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**POSITION DESIRED:**

Position: \_\_\_\_\_

Days/ Hours available to work: \_\_\_\_\_

Date you can start: \_\_\_\_\_ Desired salary: \_\_\_\_\_

How were you referred to Hy-Tech Roofing Services, Inc?

☐ Hy-Tech employee (name of person) \_\_\_\_\_ ☐ Newspaper ☐ Sign ☐ Hy-Tech Website  
☐ Advertisement ☐ Employment Agency ☐ Walk-in ☐ Relative (name of relative) \_\_\_\_\_

**DRIVING HISTORY:**

Do you presently have a valid driver's license? ☐ Yes ☐ No What method of transportation will you use to get to work? \_\_\_\_\_

State: \_\_\_\_\_ License #: \_\_\_\_\_ Class of License: \_\_\_\_\_

If you presently have a Class E Louisiana Driver's License or you do not have a Driver's License, are you willing to get a Louisiana Driver's License (Class D or Commercial/CDL) within thirty (30) days of employment? ☐ Yes ☐ No

Have you had any accidents during the past three years? ☐ Yes ☐ No How many? \_\_\_\_\_

Have you had any moving violations during the past three years? ☐ Yes ☐ No How many? \_\_\_\_\_

Have you ever had license suspension/revocation or citation for DWI? ☐ Yes ☐ No

If yes, when and where? \_\_\_\_\_

**TWIC:**

Do you presently have a TWIC (Transportation Worker Identification Credential)? ☐ Yes ☐ No If yes, will need a copy of card.

If no, are you willing to apply for a TWIC card within thirty (30) days of employment? ☐ Yes ☐ No

**TRAINING CERTIFICATION:**

Are you currently NRCA CERTA trained for torch application? ☐ Yes ☐ No

If yes, please give the Expiration Date: \_\_\_\_\_ We will need a copy of your CERTA card.

Have you successfully completed ARSC Basic Plus Training within the past year? ☐ Yes ☐ No Date completed: \_\_\_\_\_

Are you OSHA 10 Hr. Certified? ☐ Yes ☐ No Date Certified: \_\_\_\_\_

Are you OSHA 30 Hr. Certified? ☐ Yes ☐ No Date Certified: \_\_\_\_\_

Do you presently have any other certification cards? (i.e. Gulf Coast Safety Classes, Industrial Plant, Site Specific, CPR etc.)

Please list all certifications (we will need a copy of each at time of hiring): \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**REFERENCES:**

(Please list two references other than relatives or previous employers)

Name	Occupation	Address	Telephone
Name	Occupation	Address	Telephone

**EMPLOYMENT HISTORY:**Are you currently employed? ☐ Yes ☐ No If yes, may we contact your present employer? ☐ Yes ☐ No

Current Employer Information: Name of Company: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

List former employment starting with most recent (Minimum of at least 3)

Employer		Dates Employed		Job Duties		
		From	To			
Address						
Telephone	Supervisor	Hourly Rate/Salary		Reason for leaving	Position	May we contact this employer <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Dates Employed		Job Duties		
		From	To			
Address						
Telephone	Supervisor	Hourly Rate/Salary		Reason for leaving	Position	May we contact this employer <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Dates Employed		Job Duties		
		From	To			
Address						
Telephone	Supervisor	Hourly Rate/Salary		Reason for leaving	Position	May we contact this employer <input type="checkbox"/> Yes <input type="checkbox"/> No

**Specialized Skills:**

(Complete this section when applying for Office Administration/Estimator /Project Management /Superintendent position)

Typing: <input type="checkbox"/> Yes <input type="checkbox"/> No wpm: _____	10 Key Calculator: <input type="checkbox"/> Yes <input type="checkbox"/> No	Mac: <input type="checkbox"/> Yes <input type="checkbox"/> No
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**Indicate Skill Level:**

	<u>None</u>	<u>Basic</u>	<u>Intmd</u>	<u>Adv</u>		<u>None</u>	<u>Basic</u>	<u>Intmd</u>	<u>Adv</u>
Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Power Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mac	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Did you complete the application yourself? ☐ Yes ☐ No If no, who completed? \_\_\_\_\_

**QUALIFICATIONS AND PHYSICAL DATA:**

Qualifications for sheet metal workers, roofers, or laborers include but are not limited to the following: Must have roofing and/or sheet metal experience; have full range of mobility in upper and lower body; ability to work in various positions, including, but not limited to stooping, standing, bending over, sitting, kneeling, and squatting for extended periods of time; ability to work in direct sunlight and cold for extended periods; ability to work with hot asphalt and torch (open flame) applications; ability to work on rooftops and from ladders in a safe manner; ability to lift (90+lbs.), pull, and push material and equipment to complete assigned job tasks; must have basic tools (at time of interview).

Do you have any physical limitations that would prevent you from performing work for which you are being considered?

☐ Yes

☐ No

<b>PLEASE READ CAREFULLY</b>
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**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Hy-Tech Roofing Services, Inc. (hereinafter called "the Company"), I agree that:

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated) and others, perform a background check, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that provides a drug free work place as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I further understand that my employment with the Company can be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

This Company is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our Company.