



SIMON ROOFING
 AMERICA LOOKS UP TO US
Since 1900

APPLICATION for EMPLOYMENT

Federal, State and local laws and regulations prohibit discrimination on the basis of race, color, religion, national origin, ancestry, sex, disability or medical condition, marital status, veteran status and age. The information on this Application is not solicited for, nor shall it be used for, the purpose of unlawful discrimination. Simon Roofing and Sheet Metal Corporation is an Equal Opportunity / Affirmative Action Employer.

I. PERSONAL DATA

NAME _____
First MI Last

ADDRESS _____ Email Address _____
Street, P. O. Box, Apartment No., R.F.D.

City State Zip Code

PHONE NUMBER _____ Are you at least 18 years of age? Yes No

SOCIAL SECURITY NUMBER _____ - - I prefer to provide my SSN in person

Are you a U.S. Citizen, National of the U. S., an Alien lawfully admitted for permanent residence or an Alien authorized to be hired for the job for which you are applying? Yes No

Have you ever been convicted of or plead guilty to a felony? Yes No If Yes, describe in detail below.

List the job(s) for which you are applying:

First Choice: _____ Expected wage: \$ _____ Hourly Annually

Second Choice: _____ Expected wage: \$ _____ Hourly Annually

Employment availability: Full-Time Part-Time Weekends Evenings Travel Relocate

Part-Time days/hours of availability: M T W T F S S _____ am pm _____ am pm

When are you available to begin work? _____
Date / Time

Have you previously applied or been employed by Simon Roofing and Sheet Metal Corporation?
 Yes No If Yes, list date(s) of application and/or employment, Branch location and position.

II. EMPLOYMENT HISTORY

Present or Most Recent Employer From _____ To _____
Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Supervisor/Title _____
Your Position _____ Starting Rate _____ Ending Rate _____
Reason for leaving _____

May we contact this employer? Yes No

Previous Employer From _____ To _____
Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Supervisor/Title _____
Your Position _____ Starting Rate _____ Ending Rate _____
Reason for leaving _____

May we contact this employer? Yes No

Previous Employer From _____ To _____
Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Supervisor/Title _____
Your Position _____ Starting Rate _____ Ending Rate _____
Reason for leaving _____

May we contact this employer? Yes No

Previous Employer From _____ To _____
Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Supervisor/Title _____
Your Position _____ Starting Rate _____ Ending Rate _____
Reason for leaving _____

May we contact this employer? Yes No

Previous Employer From _____ To _____
Name _____
Address _____
City _____ State _____ Zip Code _____
Phone _____ Supervisor/Title _____
Your Position _____ Starting Rate _____ Ending Rate _____
Reason for leaving _____

May we contact this employer? Yes No

III. EDUCATIONAL BACKGROUND

HIGH SCHOOL From _____ To _____
Name _____
Location _____
Course of Study _____

Years Completed _____ Diploma Yes No

COLLEGE From _____ To _____
Name _____
Location _____
Course of Study _____

Years Completed _____ Degree Yes _____ No

TRADE/BUSINESS SCHOOL From _____ To _____
Name _____
Location _____
Course of Study _____

Years Completed _____ Degree/Certification Yes _____ No

ADDITIONAL SKILLS / TRAINING _____

IV. MILITARY SERVICE

Have you ever served in the armed forces? Yes No If Yes, what branch? _____

Honorably discharged? Yes No Date _____ Rank at discharge _____

What were your duties in the service, including special training, duty station

V. GENERAL INFORMATION

Have you ever been Bonded? Yes No If Yes, for what reason and in what state

Have you ever been refused a Bond? Yes No If Yes, please describe in full detail

List the name, position, Branch location of any Simon Roofing and Sheet Metal Corporation employee(s) you have known at least two (2) years. Do not list relatives.

Name _____ Address, City, State, Zip Code _____

Phone _____ Position _____ Branch Location _____

Name _____ Address, City, State, Zip Code _____

Phone _____ Position _____ Branch Location _____

Name _____ Address, City, State, Zip Code _____

Phone _____ Position _____ Branch Location _____

VI. SIGNATURE

I certify the information I have provided in this Application for Employment is true and complete to the best of my knowledge. I understand that, if hired, discovery of any false information provided or any relevant information omitted (no matter when discovered) may result in the immediate termination of my employment. I authorize Simon Roofing and Sheet Metal Corporation to make whatever inquiries it deems necessary or appropriate of any person or organization to verify any of the information I have provided in this application and to determine my qualifications and abilities. I hereby release Simon Roofing and Sheet Metal Corporation from any and all claims or action or causes of action arising out of the Company's lawful inquiries and/or its determination of my qualifications and abilities. I understand that as part of Simon Roofing and Sheet Metal Corporation's procedure for processing employment applications, an investigation and/or report may be made by a consumer reporting agency, and/or other agencies, in the process of which information may be obtained through consumer credit databases and/or interviews with third parties such as family members, business associates, financial sources, friends, neighbors or others with whom I am or have been acquainted. These inquiries may include, without limitation, information as to my character, general reputation, personal characteristics, credit history, criminal record, driving record and mode of living, whichever may be applicable. I authorize Simon Roofing and Sheet Metal Corporation to have such investigations and/or reports made. I understand that under the Federal Fair Credit Reporting Act, I have a right to make a written request within a reasonable period of time for a complete and accurate disclosure by the Company of the nature and scope of the investigation requested. I understand that if an offer of employment is made to me, it may be conditional upon the **completion of a Social Security # Verification with the Department of Social Security Administration and my completion of a physical examination** which demonstrates that I am capable of performing the essential functions of the job for which I am applying, and upon the results of the credit and other investigations and reports above authorized. Simon Roofing and Sheet Metal Corporation may, within its discretion, withdraw its conditional offer of employment based upon the results of an examination and/or investigation. I hereby consent to undergo the physical examination which may include any and all tests and procedures determined by the Company to be helpful in evaluation of my suitability for employment, including but not limited to clinical examinations, blood tests, urinalysis and x-rays. I understand that employment with Simon Roofing and Sheet Metal Corporation continues only as long as the employee and the Company both wish to continue. I understand that, if I am hired by Simon Roofing and Sheet Metal Corporation, either I or the Company may terminate my employment at any time for any reason. Any modification of this arrangement must be signed by me and an authorized representative of Simon Roofing and Sheet Metal Corporation.

I have read and understand the foregoing conditions of employment and am in agreement with its content.

Applicant Signature

Date



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A M E R I C A L O O K S U P T O U S
Since 1900