



APPLICATION FOR EMPLOYMENT

Rommel Fence LLC, headquartered in Poland, NY, is an equal opportunity employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state and federal law. Rommel Fence also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. Please advise if you require an accommodation in the application process.

PERSONAL

Please print all information except your signature.

Date: _____

Name _____ Telephone No.: _____

Present Address _____
 NO. STREET CITY STATE ZIP

Previous Address _____
 NO. STREET CITY STATE ZIP

Indicate hours and days of availability.
 (Unavailability should be limited to reasons other than religious observances or military training.)

Position applied for _____

Rate of pay expected \$ _____ per hr.

Monday _____	Friday _____
Tuesday _____	Saturday _____
Wednesday _____	Sunday _____
Thursday _____	No preference _____

What date will you be available for work? _____

Were you previously employed by us? Yes No If yes, when? _____

If you are hired, will you have reliable transportation to work? Yes No

How were you referred to us?

Advertisement Friend
 Current Employee Other
 Specify _____

Are you legally authorized to work in the United States? Yes No
 (You will be required upon employment to submit verification of your legal right to work in the United States.)

Have you ever been discharged or have you resigned from a job because your employer indicated that it believed you were involved in workplace incident(s) relating to violence, threats of violence, possession of weapons, suspected theft, repeated harassment of employees, customers or vendors, lewd behavior, possession of alcohol or illegal drugs, or being under the influence of alcohol or illegal drug usage at its workplace? Yes No

If so, please explain _____

Use the space below to summarize any additional experiences or skills that help qualify you for the position for which you are applying. Exclude any activities that reflect personal characteristics protected by law (e.g., religion, race, disability, etc.)

EDUCATION

NAME OF SCHOOL AND CITY	GRADUATED		YEARS COMPLETED	MAJOR	GRADE POINT AVERAGE
	YES	NO			
HIGH SCHOOL				X	
COLLEGE					
GED OR OTHER					
HOBBIES; INTERESTS					

EMPLOYMENT

LIST YOUR WORK EXPERIENCES BEGINNING WITH YOUR MOST RECENT. Write additional experience on the back of this form.

NAME OF EMPLOYER	EMPLOYMENT DATES		DESCRIBE DUTIES PERFORMED	REASON FOR LEAVING
	FROM (MM/YY)	TO (MM/YY)		
ADDRESS	RATE OF PAY	RATE OF PAY		D Discharge D Layoff D Resignation Explain: May we contact this employer? D Yes D No
CITY & STATE				
PHONE NUMBER	POSITION	POSITION		
TYPE OF BUSINESS				
NAME OF SUPERVISOR				
NAME OF EMPLOYER	EMPLOYMENT DATES		DESCRIBE DUTIES PERFORMED	REASON FOR LEAVING
FROM (MM/YY)	TO (MM/YY)			
ADDRESS	RATE OF PAY	RATE OF PAY		D Discharge D Layoff D Resignation Explain: May we contact this employer? D Yes D No
CITY & STATE				
PHONE NUMBER	POSITION	POSITION		
TYPE OF BUSINESS				
NAME OF SUPYRVISOR				
Licenses and Certifications	DATES		Drug Policy	
	Year	Refresher		
OSHA 10 HR COMPETENT PERSON			Rommel Fence, LLC has a drug policy, including random drug testing. This policy is displayed in the shop area. Copies are available on request. Drug testing can be done on demand. Refusal to comply with testing request can result in immediate dismissal. All Rommel Fence, LLC work sites and vehicles are to be drug free.	
OSHA FORKLIFT				
OSHA 30 HR HAZMAT				
OSHA 30 HR SUPERVISOR				
FIRST AID/CPR				

Federal driver privacy protection act authorization to obtain motor vehicle record

For the sole purpose of the determination and evaluation of my motor operating record and pursuant to State and Federal regulations of compliance, I, _____ authorize Rommel Fence, LLC, to obtain my Motor Vehicle record. I understand that this record may contain personal information concerning any/all driver violations and/or accidents, which may be on record through the NYS Department of Motor Vehicles.

In addition, should my application be accepted for employment or upon my employment as an Employee for Rommel Fence, LLC. I further authorize ANY/ALL additional requests for the sole purpose of my continued evaluation and eligibility standards under State and Federal regulatory compliance requirements.

Signature _____ Driver's License # _____ Date _____

The information contained in this application is true and complete to the best of my knowledge and belief. I understand that any false or inaccurate information or misrepresentation of fact or omission of information requested, as stated or implied, given in my application, interview(s), or any other employment form, may be sufficient reason not to hire me and may be reason for dismissal. I understand that I will be required to pass a pre-employment drug screen, and if hired, I will be subject to Rommel Fence drug and alcohol testing policy during my employment.

I understand and agree that all information furnished in this application may be verified by Rommel Fence or its authorized representative. I waive any right I may have to notice from any individuals and organizations named or referred to in this application prior to the release of any employment or education information to Rommel Fence. I hereby authorize all individuals and organizations named or referred to in this application to give Rommel Fence all information relative to such verification and hereby release such individuals, organizations and Rommel Fence from any and all liability for any claim or damage resulting therefrom.

I understand that, if hired, I will be required to provide documentation of both my identity and employment eligibility in the United States in accordance with the Immigration Reform and Control Act of 1986.

I understand that, if hired, my employment will be subject to various guidelines, rules and regulations of Rommel Fence as stated in the employee handbook, any policy and procedure manual or other communications to employees. I further understand that Rommel Fence policies and procedures are subject to modification without notice.

Signature of Applicant _____

Date _____