

## **Application for Employment**

Date:		

Equal Opportunity Employer – South Central Roofing, Inc. is an Equal Opportunity Employer and complies with all applicable federal and state laws and regulations. SCR does not discriminate against any person(s) because of age, race, color, creed, religion, disability, gender, ethnic or national origin, or veteran status. SCR will reasonably accommodate applicants with a disability, upon request, and will also ensure reasonable accommodations for employees with a disability.

Personal Inform	ation						
Name							
Current Address		City	Sta	ate	Zip Code		
Phone #			Referred By:				
Employment De	esired						
Position:		Date Y	ou Can Start:		Desired Hourl	y Pay: \$	
Currently Employed	l?Yes	_No	If yes, may we in	quire your curr	ent employer?	Yes	No
Applied to this com	pany before?	Yes	No Wor	ked for this co	mpany before?	Yes	No
Subjects of special					Voc. No.		
Have you ever been					YesINO		
If yes, Date and County: U.S Military Service:				·· ·			
Former Employe	ers						
Date (month/yr)	Name of Em	nployer	Salary	Position	Reaso	on for Lea	ving
From							
To							
From To							
From							
T <sub>0</sub>							

## **Authorization**

"I understand that SCR is an 'at will' company and agree that no representative of the company has any authority to enter into an agreement for employment for any specified period of time, or to make an agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for termination. I voluntarily authorize SCR to obtain a background screening report in connection with my application and/or for all decisions regarding offers of employment or continued employment. I authorize verification of all statements contained herein, the references and employers listed above may have (personal or otherwise), and release the company of all liability for any damage that may result from utilization of such information.

Date:	Signature				
*By signing below alcohol policy.	, you indicate that you have re	ead and fully understand South Central Roofing's drug and			
Any person seekir employment drug test, through a de	and alcohol screening test. I duction on the employee's ne	entral Roofing, Inc., will be required to take a pre- Employees will be responsible for payment of any failed ext check. SCR performs suspicion / probable cause drug fuses to participate will be terminated immediately.			
Date:	Signature				
	, you indicate that you have re information and background	ead and fully understand South Central Roofing's policy I screening.			
employment. I authorize verification of all statements contained herein, the references and employers listed above may have (personal or otherwise), and release the company of all liability for any damage that may result from utilization of such information.					