

Creek Pipe Company Employment Application Form

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

		DATE					
Name							
Name		First		Middle		Maiden	
Present address							
	Number	Street	City	/ State	Zip		
How long			Social	Security No.			
Telephone () Email address:							
If under 18, please list a	age						
Position applied for (1 and salary desired (2 (Be specific)	Days/hours available to work No Pref Thur Mon Fri Tue Sat Wed Sun						
How many hours can you work weekly? Can you work nights?							
Employment desired	□FULL-TIME ONLY	□PAR	Γ-TIME ON	LY 🗆 F	FULL- OR PAF	RT-TIME	
When available for wor	k?						
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATI	ION		OF YEARS PLETED	MAJOR & DEGREE	
High School				001111		DEGINEE	
College							
Certifications:							
HAVE YOU EVER BEE	N CONVICTED OF A CR	IMF?	□ No	☐ Yes			
HAVE YOU EVER BEEN CONVICTED OF A CRIME?							
committed, sentence(s) imposed, and type(s) of rehabilitation.							
DO YOU HAVE A DRIV	/ER'S LICENSE? DIY	′es □ No	Driver's lice	ense number			
State of issue		mmercial (CDL					
	transportation to work?		,				
	ing violations during the pa	-		-	-		
Have you had any accid	dents during the past three	e years? 🛚 Yes	s □ No If	yes, how ma	ny?		
Please list two referen	nces other than relatives	or previous e	mnlovers				
Name:	1000 Other than relatives	or previous e	Name:				
Years known: Relationship:				ars known: Relationship:			
Telephone:				Telephone:			
			-				
MILITARY HAVE YOU EVER BEEN IN THE ARMED FORCES?							
Specialty Date Entered Discharge Date							

W	Diagonal Park and an analysis of the state o	Construction to the contract of the contract o							
(most recent)	Vork Experience #1 Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.								
Name of employer		Supervisor Name	Employment dates	Pay or Salary					
Job Title			From	Start					
Address			То	Final					
Phone number			10	Fillal					
Reason for leaving (be s	specific)	1	1						
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.									
Work Experience #2		Comania an Nama	L Completions and dates	Day on Colony					
Name of employer		Supervisor Name	Employment dates	Pay or Salary					
Job Title			From	Start					
Address			То	Final					
Phone number	an acifia)								
Reason for leaving (be s	specific) uties performed, skills used or learned, advance	ements or promotions wh	ile vou worked at this con	npany.					
List the jobe you hold, a	and performed, exime adda or loamed, advants	omonio or promotiono un	no you workou at time oon	ipany.					
Work Experience #3	I								
Name of employer	<u> </u>	Supervisor Name	Employment dates	Pay or Salary					
Job Title			From To	Start Final					
Address			10	rillai					
Phone number									
Reason for leaving (be	specific)	1	1						
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.									
May we contact your present employer? ☐ Yes ☐ No Did you complete this application yourself ☐ Yes ☐ No									
If not, who did?									
PLEASE READ CAREFULLY									
In exchange for the consideration of my job application by Creek Pipe Co. (hereinafter called "the Company"), I agree that:									
Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied									
for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and									
the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Creek Pipe Co., or otherwise to change in any respect the employment-at-will relationship									
between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General									
Manager of the Company. Both the undersigned and Creek Pipe Company may end the employment relationship at any time, without									
specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and									
procedures and such changes may include reduction in benefits. 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), references, and others, and hereby release the Company from any liability as a result of such									
contract. I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after									
employment; (2) consent to and compliance with such policy is a condition of my employment; and (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 understand that, in connection with the routine processing of your employment application, the Company may request from a consumer									
reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal									
characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning									
the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.									
I further understand that my employment with the Company shall be probationary for a period of sixty (60) 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.									
This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.									
Signature of applica	nt	Date:							

This Company is an equal employment 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.