



# APPLICATION FOR EMPLOYMENT

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, gender, national origin, veteran status, disability, or any other legally protected status.

1. Please review the instructions listed below carefully before filling out this Application. Failure to follow the instructions or failure to fully complete and sign this form will result in the exclusion of your Application.
2. This Application will be kept on file for 60 days. If you wish to be considered for employment after 60 days from the date you submit your Application, you need to return to the office and fill out another application.
3. Answer only the questions asked. DO NOT include any extraneous information which would indicate your race, age, color, sex, religion, national origin, disability or union affiliation. Since we are an Equal Opportunity Employer, information relating to those factors has no place in our hiring process.

## PERSONAL DATA

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

|  |       |        |      |
|--|-------|--------|------|
|  | First | Middle | Last |
|--|-------|--------|------|

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

|  |      |       |     |
|--|------|-------|-----|
|  | City | State | Zip |
|--|------|-------|-----|

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

Best times to contact you: \_\_\_\_\_ Home Phone Number ( ) \_\_\_\_\_

Work Phone Number ( ) \_\_\_\_\_ Cell Phone Number ( ) \_\_\_\_\_

Position Sought: \_\_\_\_\_ Salary Requested: \_\_\_\_\_

Will you accept full-time work? \_\_\_\_\_ Yes No

Will you accept part-time work? \_\_\_\_\_ Yes No

Will you accept a temporary assignment? \_\_\_\_\_ Yes No

Will you accept shift work? \_\_\_\_\_ Yes No

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

How were you referred to Precision Kidd Steel? \_\_\_\_\_

Are you currently on lay-off status and subject to recall?  Yes  No

Are you of legal age to work?  Yes  No

Are you a U.S. citizen or have a legal right to be employed in the U.S.? (If yes, proof is required)  Yes  No

Can you perform the essential functions of the job(s) for which you are applying?  Yes  No

Do you have a position with another employer that would continue if employed by us?  Yes  No

If travel is required, do you have any restrictions?  Yes  No

Can you work overtime without prior notice?  Yes  No

Do you have any experience from military service that would be relevant to the Job(s) for which you are applying? If Yes, please explain:  Yes  No

Have you ever been convicted of a felony, misdemeanor or released from prison in the past seven years? If Yes, please explain (Note: A yes answer does not automatically disqualify you from employment. The nature of the offense, date and type of job for which you are applying will be considered):  Yes  No

**EMPLOYMENT HISTORY (Please list your present or most recent employer first)**

May we contact your most recent employer?

Yes

No

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

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

Wage/Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Nature of work performed and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

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

Wage/Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Nature of work performed and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

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

Wage/Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Nature of work performed and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Employer: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ Employed From \_\_\_\_\_ To \_\_\_\_\_

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

Wage/Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Nature of work performed and responsibilities: \_\_\_\_\_

\_\_\_\_\_

Please explain any gaps in dates of employment: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever worked with or for any employees of this company who would be willing to give you a good reference? If so, who?  
\_\_\_\_\_  
\_\_\_\_\_

| <b>EDUCATION</b>       |             |                         |                              |                                |               |
|------------------------|-------------|-------------------------|------------------------------|--------------------------------|---------------|
| <b>School Attended</b> | <b>Name</b> | <b>City, State, Zip</b> | <b>Major/Course Of Study</b> | <b>Highest Level Completed</b> | <b>Degree</b> |
| High School            |             |                         |                              |                                |               |
| College                |             |                         |                              |                                |               |
| Graduate School        |             |                         |                              |                                |               |
| Business/Trade         |             |                         |                              |                                |               |
| Other (Describe):      |             |                         |                              |                                |               |

Certifications: (Please list type and date) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any special skills or training, computer and software knowledge, or equipment you can operate: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**PLEASE READ CAREFULLY**

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**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by P. K. Steel Co., Inc. (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 confer any right to remain an employee of the Company, 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 or Executive Vice President. Both the undersigned and the 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 the 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 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 contact. I agree that the Company or any of its subsidiaries shall not be liable in any respect if my employment is terminated because of falsity of statements, answers, or omissions made by me on this application.

I understand that each applicant for employment with will be required, as a condition of employment, to undergo a drug screen. Applicants will be asked to read the policy and sign. If an applicant tests positive and is determined to be in violation of this Policy, the applicant will be ineligible for employment until: (a) a subsequent confirmation drug screen is performed and (b) those results are determined to be negative by a Medical Review Officer. It is preferred that a new employee be tested prior to reporting to work. However, it is realized that under certain circumstances a new employee may start before test results are known. In such circumstances the employee's continued employment is conditional upon passing the drug screen.

I understand that in connection with the routine processing of your employment application I will be required to authorize the Company to conduct a criminal background check and the Company may request information regarding credit history. These requests will be processed by an outside company that will, upon written request from me, 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.

A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, will be considered.

I certify that the information I have provided in this application and background check are true and complete. I understand that false information on this application including misdemeanor and felony convictions may be grounds for immediate termination of employment at any time. I authorize the verification of any and all information listed

I further understand that my employment with the Company shall be introductory for a period of ninety (90) days, and further that at any time during the introductory period or thereafter, my employment relations with the Company is terminable at will for any reason by either party. In addition, I understand that no promise, representation or agreement to the foregoing is binding on the Company unless made in writing and signed by me and an authorized representative of the Company.

Signature of Applicant: \_\_\_\_\_  
(If submitting electronically, please type your full name)

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

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

