



4520 S. MACARTHUR BLVD
 OKLAHOMA CITY, OKLAHOMA 73179
 FAX: (405)680-9314
 COMMITTED TO A DRUG FREE WORKPLACE

FOR HR/FOREMAN USE ONLY

DATE OF HIRE: _____
 POSITION: _____
 RATE OF PAY: _____
 DRUG TEST DATE: _____
 LOCATION: _____

Application for Employment

We offer equal employment opportunities to all persons without regard to race, color, religion, age, marital status, Veteran’s status, sex, national origin, disability, or any other legally protected status.

Job applications will be considered active for 90-days, after which the applicant must reapply for further consideration.

ALL APPLICANTS MAY REQUEST ANY NEEDED ACCOMMODATION TO PARTICIPATE IN THE APPLICATION PROCESS. FOR EXAMPLE, AN APPLICANT MAY REQUIRE ASSISTANCE IN FILLING OUT THE APPLICATION OR PARTICIPATING IN A JOB INTERVIEW.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Emergency Contact: _____ Phone: _____

Type of Employment Desired: _____

Rate of Pay Expected: _____ Annually?: _____ Hourly?: _____

Are you a citizen of the United States? YES NO Are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

If yes, why do you desire to make a change? _____

Have you ever been convicted of, pled guilty or “no contest” to a felony that may prevent you from passing a background check required to work on federal or military/government installations? YES NO Please Note: Conviction of felony does not automatically disqualify an applicant for employment.

If yes, state offense, date, court, and place where convicted: _____

Who referred you to our company? _____

Are you a Union member? YES NO Local No: _____

After reviewing the provided job description, are you able to preform all essential job-related tasks with or without accommodation? YES NO

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Please provide any additional information such as special skills, training, management experience, equipment operation, or qualifications that you feel will be helpful to us in considering your application.

Previous Employment

Start with you most recent employer. If applying for a DOT position, list employers for the previous 10 years. All employers for the last three years will be contacted. Attach additional sheets if necessary.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Residences

Please list the previous three residence locations.

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Additional Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Conditional Offer of Employment

All qualified applicants will receive consideration for employment. Recruitment, hiring, training, and promotions will be administered without regard to race, color, religion, national origin, or sex. Criminal convictions related to any sexual offenses, drug related offenses, or crime involving personal injury or threat to another person may make applicant ineligible for employment with the company.

In accordance with Company policy and the Federal Drug Free Workplace Act of 1988, all applicants who receive a conditional offer of employment are required to take a pre-employment test for controlled substances. Refusal to undergo testing or a positive test result is grounds for refusal to hire or discharge will disqualify the applicant for employment at the Company for a minimum of one year. A social security card, current Oklahoma driver's license (or alternate documents per immigration and Naturalization Service's Regulations), and documentation of required licenses must be submitted immediately after a conditional offer of employment has been made.

DeVinci Cast Stone conditionally offers the position of:

Position Title: _____ To: _____

This conditional offer is subject to the following SPECIAL CONDITIONS OF EMPLOYMENT:

1. You must take and pass a drug test. Upon acceptance of this conditional offer, you are entitled to receive a copy of DeVinci Cast Stone's Drug Free Workplace Policy and Drug and Alcohol Testing Policy.
2. If applying for a DOT regulated position, you must meet the qualification requirements set forth in 49 CFR section 391.
3. You agree to abide by and follow all Company policies.

This offer is conditional upon completing and our verifying the answers on your application for employment.

I agree by signing the Consumer Authorization Release Form that my employment or retention may be determined in whole or in part from a report provided by a third-party company.

As a vehicle driver, I understand I will be subject to immediate termination if I become uninsurable as a driver due to traffic violations, irrespective of fault.

False or intentionally misleading answers to these questions as well as false or misleading answers on your application and/or job interview are grounds for rescinding this offer or terminating your employment.

I understand and accept the conditions of employment stated above and can report to work, when notified, pending the results of my drug screening.

Applicant Signature: _____ Date: _____

Applicant Certification

PLEASE READ THE FOLLOWING CERTIFICATION CAREFULLY BEFORE SIGNING JOB APPLICANTS CERTIFICATION.

I certify that the information provided by me in this application is true in all aspects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient reason for denial of employment or discharge. I authorize the use of any information in this application to verify my statements. Except as indicated above, I authorize past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, previous education or employment record. I release all such persons from any liability damages because of having furnished such information. I consent to such investigations as this employer may make regarding driving records, law enforcement records, credit reports, and my general background. I further understand that all applicable portions of this application must be completed, or I will be ineligible for consideration for the position for which I am applying. I understand that nothing contained in this employment application or in the granting of an interview is intended to create and employment contract of for the providing of any benefits between this employer and the applicant. No promises regarding employment have been made to me, and I understand that no promise or guarantee of employment for any specific length of time or under any specified circumstances shall be binding upon unless made in writing by or with the express written consent and authorization of the President or owner. If an employment relationship is established, I understand that all employment is at will, and that I have the right to terminate my employment at any time and for any reason or for no reason at all and that this employer retains the same right.

I understand that if I am initially offered a position of employment, I will be required to submit to a drug and alcohol tests which are a condition of employment, and that refusal to submit to any such tests when asked by this employer shall be considered sufficient reason for denial of employment or discharge and will disqualify me for employment with the Company for a minimum of one year.

I understand that if employed, the policies and rules issued by this employer are not contractual and that this employer may revise policies or procedures, in whole or in part, unilaterally at any time.

IMPORTANT: IF YOU DO NOT UNDERSTAND OR IF YOU DISAGREE WITH ANY PORTION OF THE ABOVE CERTIFICATION, DO NOT SIGN BEFORE DISCUSSING WITH THIS COMPANY.

This certifies that this application was completed by me, and that all entries on it are true and complete to the best of my knowledge.

Applicant Signature: _____ Date: _____