

EXPRESS PIPE & SUPPLY CO., INC.

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Please Print

Date _____

Name _____
Last First Middle

Business Telephone (____) _____ Home Telephone (____) _____

Social Security # _____

Present Address

No. Street City State Zip

Permanent Address, if different from present address:

No. Street City State Zip

Employment Desired

Position applying for: _____

Regular full-time work? Yes ___ No ___

Regular part-time work? Yes ___ No ___

Temporary work, e.g., summer or holiday work? Yes ___ No ___

What days and hours are you available for work? _____

If applying for temporary work, during what period of time will you be available?

From _____

Are you available for work on weekends? Yes ___ No ___

Would you be available to work overtime, if necessary? Yes ___ No ___

If hired, on what date can you start work? _____

Salary desired: _____

Personal Information

Have you ever applied to or worked for EXPRESS PIPE before? Yes ___ No ___

If yes, when? _____

Do you have any friends or relatives working for EXPRESS PIPE? Yes ___ No ___

If yes, state name(s) and relationship(s) _____

Why are you applying for work at EXPRESS PIPE? _____

If hired, would you have a reliable means of transportation to and from work? Yes ___ No ___

Are you at least 18 years old? Yes ___ No ___

(If under 18, hire is subject to verification that you are of minimum legal age.)

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to work and to live in this country? Yes ___ No ___

Are you able to perform the essential functions of the job for which you are applying? Yes ___ No ___

If no, describe the functions that cannot be performed. _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes ___ No ___
(Convictions for marijuana-related offenses that are more than two years old need not be listed.)

If yes, state nature of the crime(s), when and where convicted and disposition of the case(s). _____

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Are you currently employed? Yes ___ No ___

If so, may we contact your current employer? Yes ___ No ___

Employment History

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Education, Training and Experience

School	Name and Address	# of Years Completed	Did You Graduate?	Degree/Diploma
High School			Yes ___ No ___	
College/ University			Yes ___ No ___	
Vocational/ Business			Yes ___ No ___	

Many of our customers (clients) do not speak English. Do you speak, write or understand any foreign languages? Yes ___ No ___

If yes, which language(s)? _____

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at EXPRESS PIPE? If so, please explain. _____

Answer the following questions if you are applying for a professional position.

Are you licensed/certified for the job applied for? Yes ___ No ___

Name of license/certification _____

Issuing state _____

License/certification number _____

Has your license/certification ever been revoked or suspended? Yes ___ No ___

If yes, state reason(s), date of revocation or suspension and date of reinstatement. _____

Employment History (Continued)

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Note: Attach additional page(s) if necessary.

Employment History (Continued)

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Name of Employer _____

Address _____

No. Street City State Zip

Type of Business _____

Telephone No. (_____) _____ Your Supervisor's Name _____

Your Position and Duties _____

Date of Employment: From _____ To _____

Weekly Pay: Starting _____ Ending _____

Reason for Leaving: _____

Note: Attach additional page(s) if necessary.

Military Service

Have you obtained any special skills or abilities as the result of service in the military? Yes___ No___

If so, describe: _____

References ,

List below three persons not related to you who have knowledge of your work performance within the last three years.

Name: _____

Address _____

No. Street City State Zip

Occupation: _____

Telephone No. (_____) _____ Number of Years Acquainted _____

Name: _____

Address _____

No. Street City State Zip

Occupation: _____

Telephone No. (_____) _____ Number of Years Acquainted _____

Name: _____

Address _____

No. Street City State Zip

Occupation: _____

Telephone No. (_____) _____ Number of Years Acquainted _____

Please Read Carefully, Initial Each Paragraph and Sign Below

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, Express Pipe & Supply Co., Inc. is an at-will employer and that my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

_____ I understand that the Company promotes a system of alternative dispute resolution, which involves binding arbitration to resolve all disputes, which may arise out of the employment context. Because of the mutual benefits (such as reduced expense and increased efficiency) which private binding arbitration can provide to both an Employer and myself, I agree that any claim, dispute, and /or controversy arising between myself and Express Pipe & Supply Co., Inc. shall be submitted to and determined exclusively by binding arbitration under the Federal Arbitration Act, in conformity with the procedures of the California Arbitration Act.

Date _____

Signature of Applicant _____

EXPRESS PIPE AND SUPPLY

APPLICANT NOTIFICATION

In conjunction with your application for employment with us, we utilize the services of EMPLOYEE RELATIONS, INC. to conduct a background investigation regarding your character, general reputation, personal characteristics, and mode of living. The investigative report may be comprehensive and include inquiry into past employment, education, and activities, including, but not limited to public records, credit history, criminal background information and driving record.

EMPLOYEE RELATIONS, INC. will, to the extent permitted by law, upon request, reasonable notice, and proper identification, provide you with information that was used in generating the report.

EMPLOYEE RELATIONS, INC. can be contacted at:

**EMPLOYEE RELATIONS, INC.
20720 VENTURA BOULEVARD, SUITE 200
WOODLAND HILLS, CA 91364
(818) 887-9129
OR BY EMAIL TO: complianceofficer@erelations.com**

EXPRESS PIPE AND SUPPLY

"EMPLOYEE RELATIONS NETWORK MEMBER"

APPLICANT CERTIFICATION AND AUTHORIZATION

I hereby give **EMPLOYEE RELATIONS NETWORK MEMBER** and **EMPLOYEE RELATIONS, INC.** (hereinafter collectively referred to as "you") the right to conduct an investigation of my background. I understand that the investigation may include inquiry into my past employment, education, and activities, including, but not limited to, credit, criminal background information and driving record, and I release from all liability all persons, companies, schools, and corporations supplying such information. I indemnify you against any liability which might result from making such investigation. Additionally, I agree that you may obtain an investigative consumer report or other information regarding me and may consult certain files which are available. I understand that **EMPLOYEE RELATIONS, INC.** will retain the results of this investigation and a copy of my application for employment and this information may, with appropriate authorization, be disclosed in subsequent investigations to other Members of the **EMPLOYEE RELATIONS NETWORK**. I understand that any false answers, statements, implications, or derogatory information made by me or which is revealed as a result of this background investigation based on information supplied in any application for employment, or other required documents, may be considered sufficient cause for denial of employment or discharge.

I understand that you may contact my previous employers and I authorize those employers to disclose to you all records pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to you, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me.

Should an investigative consumer report be obtained from an Investigative Consumer Reporting Agency in connection with my application for employment, I understand that I have the right to receive a copy of my report, free of charge, by checking the box below.

PLEASE PROVIDE ME A COPY OF ANY REPORT GENERATED ON ME AS A RESULT OF THIS APPLICATION FOR EMPLOYMENT

I have read and understand the Summary of Your Rights Under the Fair Credit Reporting Act and the Applicant Notification, a copy of which I acknowledge receiving, advising me that a comprehensive background investigation may be conducted, which may include inquiry into past employment, education, and activities, including but not limited to, credit, criminal background information and my driving record.

DATE OF BIRTH INFORMATION IS COLLECTED FOR THE SOLE PURPOSE OF EXPEDITING YOUR BACKGROUND INVESTIGATION; IT IS NOT A FACTOR CONSIDERED IN THE EVALUATION OF YOUR APPLICATION FOR EMPLOYMENT.

Date of Birth:

Date: _____

Applicant Name (Print): _____

Address: _____

Social Security Number: _____ Email: _____

Driver's License Number: _____ State: _____ Expiration: ____/____/____

Signature: _____

Applicant's Signature