



APPLICATION FOR EMPLOYMENT

This Company is an Equal Opportunity Employer, committed to employing individuals without regard to race, color, age, sex, religion, creed, national origin, ancestry, or handicap.

Date of Application: _____

Name: _____ SSN: _____

Drivers License No. _____ State: _____

Phone: _____ Cell: _____ Email: _____

Current Address: _____

Street	City	State	Zip
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Previous Address: _____

Street	City	State	Zip
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(Last 7 Years)

Street	City	State	Zip
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Street	City	State	Zip
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Are you at least 18 years old? YES _____ NO _____

If employed and you are under 18, can you furnish a work permit? YES _____ NO _____

GENERAL:

Have you ever applied or been employed by our Company before? YES _____ NO _____

If yes, please provide dates: _____

Are you employed now? YES _____ NO _____

If so, may we contact your employer? YES _____ NO _____

Contact Name & Number: _____

If we may not inquire of your present employer, please explain why: _____

Are you on lay off and subject to recall?

YES _____ NO _____

If employed, does your employment require you to continue working for
your current employer for any specified period of time?

YES _____ NO _____

Until what date? _____

NOTICE: You will be required to present proof of citizenship or immigration status upon employment as required by Federal Law.

NOTICE: If you have any physical or mental impairment or condition that would limit your job performance in the position for which you are applying, and if the Company extends a job offer to you, please inform the Company only *after* such offer has been made to you of such an impairment or condition. Further, inform the Company only *after* such offer has been made to you of any accommodation that you require for such impairment or condition.

For what position are you applying? _____

REFERENCES: Provide the names of three persons not related to you, whom you have known for at least one year.

NAME	ADDRESS	PHONE	OCCUPATION/ RELATIONSHIP	YEARS ACQUAINTED

List any skills you have that might qualify you for the position for which you are applying: For example, type of equipment you operate, laid pipe, etc...

Have you been convicted of a crime, other than a minor traffic violation, within the last 5 years. YES _____ NO _____
If yes, describe: _____

(A conviction record will not necessarily be a bar to your employment. Factors such as the age and type of offense, the seriousness and nature of the violation, and your rehabilitation will be taken into account.)

Date you can start _____ Hourly Rate Desired _____

EMPLOYMENT HISTORY: List below your last four employers, beginning with current or most recent.

DATE Month & Year	COMPANY Name & Address	SALARY	POSITION	REASON FOR LEAVING
From: To:				
From: To:				
From: To:				
From: To:				

EDUCATION:

SCHOOL	NAME & LOCATION	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
High School				
Trade, Business, or Technical School				
College				
Other Special Work Study or Research Work				

Referral Source:

Advertisement
Walk-in

Friend
Relative

Employment Agency
Website

Other: _____

EQUAL EMPLOYMENT OPPORTUNITY INFORMATION

The information supplied below is *strictly voluntary* and will in no way affect the processing of your employment status with this company. This information sheet will *only* be used for statistical purposes. Thank you for your cooperation.

SOCIAL SECURITY NUMBER

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SEX

- ☐ Male
☐ Female

RACE

- ☐ Non-Minority/White
☐ African American/Black
☐ Hispanic/Latino
☐ Native American or Alaskan Native
☐ Asian/Pacific Islander
☐ Other/Specify _____

Disability

Are you an individual with a physical or mental impairment which substantially limits one or more of your major life activities?

Yes

No

Veteran Status

Are you a Veteran?

Yes

No

If yes, please select:

Disabled Veteran

Vietnam Era Veteran

Desert Storm/Shield

Operation Enduring Freedom/Iraqi Freedom

TAM Construction, Inc. is an equal opportunity employer

APPLICANT'S CERTIFICATION AND AGREEMENT

Please Read This Statement Carefully

I understand and agree that, if I am employed by this Company, my employment is for no definite period of time and can be terminated, with or without cause or notice at any time, at the option of either the Company or myself. I understand that no representative of this Company, other than an officer, has any authority to enter into any agreement for any employment for any specified period of time or to make any agreement with me contrary to the foregoing, except that the President of the Company may do so in writing.

I authorize investigation of all information I have disclosed herein so the Company may be provided with relevant information about my background. I understand this investigation may include personal interviews with third parties, such as family members, business associations, financial sources, friends, neighbors, or others with whom I am acquainted. I release all parties from any liability for any damage that may result from furnishing this information to you. This release extends to all pertinent information, personal or otherwise.

I authorize investigation of my credit and employment history as required by the Company as a condition of my being hired, or, if I am hired as a condition of my continued employment. I release all persons or companies conducting any lawful investigation from any liability.

I further agree to take any lawful medical or honesty examination required by the Company as a condition of my being hired, or, if I am hired, as a condition of my continued employment. I agree that my refusal to take any such lawful examination may be cause for termination of my employment. I understand that the Company will not hire any applicant who tests positive or refuses to consent to pre-employment drug testing. I further understand that an employee who tests positive or refuses to consent to pre-employment drug and alcohol testing is subject to discharge.

I release all persons or companies conducting any lawful medical or honesty examination from any liability.

I also agree to take any lawful lie detector examination and I release all persons or companies conducting such examination from any liability.

I certify that the facts contained in the Application are true and complete to the best of my knowledge and understand that, if I am employed, any statements I have falsified on this application shall be ground for dismissal. I also understand that I am required to abide by all rules and regulations of the Company.

PRINTED NAME

SIGNATURE

DATE

The undersigned hereby authorizes TAM Construction, Inc. or its insurance agency, HUB International Heartland or its assigns, to obtain copies of consumer reports, including a motor vehicle report, pertaining to me for employment purposes, and for use in rating and/or underwriting insurance for which the above named employer may apply, and any renewal thereof. I understand that in obtaining such consumer reports, a consumer reporting agency may be used, and I do hereby authorize such use. I also acknowledge that TAM Construction, Inc. has provided me with a summary of my rights under the Fair Credit Reporting Act.

Date: _____

Signed: _____

Printed Name: _____

Driver's License #: _____

State of Issuance: _____

Date of Birth: _____

Social Security #: _____

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552
b. Such affiliates that are not banks, savings associations, or credit unions also should list,	b. Federal Trade Commission: Consumer Response Center – FCRA

in addition to the CFPB:	Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above:	
a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050
b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act	b. Federal Reserve Consumer Help Center P.O. Box. 1200 Minneapolis, MN 55480
c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations	c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106
d. Federal Credit Unions	d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8 th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E.

	Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates <u>or</u> Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357