

TRUSSBILT, LLC

APPLICATION FOR EMPLOYMENT

(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

DATE: _____

 NAME: _____
 LAST FIRST MIDDLE

 PRESENT ADDRESS: _____
 STREET/PO BOX CITY STATE ZIP

PHONE NUMBER: _____ ARE YOU 18 YEARS OR OLDER: YES OR NO

EMPLOYMENT DESIRED

POSITION: _____ DATE YOU CAN START: _____ SALARY DESIRED: _____

IF CURRENTLY EMPLOYED, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

HAVE YOU EVER WORKED FOR THIS COMPANY BEFORE? _____ WHEN? _____

EDUCATION

	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMER SCHOOL	_____	_____	_____	_____
HIGH SCHOOL	_____	_____	_____	_____
COLLEGE	_____	_____	_____	_____
TRADE, BUSINESS, MILITARY	_____	_____	_____	_____

GENERAL

PLEASE LIST HOBBIES, INTERESTS OR OTHER TYPES OF JOBS YOU MAY HAVE DONE:

THE AGE DISCRIMINATION IN EMPLOYMENT ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

Application filed out by: _____

PLEASE READ THE FOLLOWING CAREFULLY

I ATTEST THAT THESE ANSWERS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. TRUSSBILT, LLC. MAY INVESTIGATE ALL STATEMENTS CONTAINED IN THE APPLICATION AND I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION PROVIDED MAY RESULT IN A WITHDRAWAL OF A JOB OFFER OR IN MY IMMEDIATE DISCHARGE.

I AUTHORIZE TRUSSBILT, INC. TO MAKE A THOROUGH INVESTIGATION OF MY PAST EMPLOYMENT, EDUCATION AND JOB-RELATED ACTIVITIES AND I RELEASE FROM LIABILITY ALL PERSONS, COMPANIES AND CORPORATIONS SUPPLYING SUCH INFORMATION. I ALSO INDEMNIFY TRUSSBILT,LLC. AGAINST ANY LIABILITY WHICH MIGHT RESULT FROM MAKING SUCH INVESTIGATION(S).

ADDITIONALLY, I AUTHORIZE TRUSSBILT, LLC TO SUPPLY MY EMPLOYMENT RECORD IN ITS SOLE DISCRETION, IN WHOLE OR IN PART, TO ANY PROSPECTIVE EMPLOYER, GOVERNMENT AGENCY, OR OTHER PARTY, WITH AN IMPACT TRUSSBILT MAY DEEM APPROPRIATE.

SIGNATURE OF JOB APPLICANT

DATE

EMPLOYMENT EXPERIENCE – LIST YOUR PRESENT OR LAST JOB FIRST

1. EMPLOYER _____ DATES WORKED _____
FROM TO

ADDRESS _____ JOB TITLE _____

TELEPHONE NUMBER _____ SUPERVISOR _____

WORK PERFORMED _____

REASON FOR LEAVING _____

2. EMPLOYER _____ DATES WORKED _____
FROM TO

ADDRESS _____ JOB TITLE _____

TELEPHONE NUMBER _____ SUPERVISOR _____

WORK PERFORMED _____

REASON FOR LEAVING _____

3. EMPLOYER _____ DATES WORKED _____
FROM TO

ADDRESS _____ JOB TITLE _____

TELEPHONE NUMBER _____ SUPERVISOR _____

WORK PERFORMED _____

REASON FOR LEAVING _____

REFERENCES – NAME THREE PERSONS NOT RELATED TO YOU.

	NAME	ADDRESS	OCCUPATION	YEARS KNOWN
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____



TRUSSBILT
APPLICATION ATTACHMENT A
PRE-EMPLOYMENT DRUG TESTING ACKNOWLEDGEMENT FORM

All use, possession, sale or transfer of drugs or alcohol while an employee is working, whether on or off the Company's premises or while operating Company machinery, equipment or vehicles is strictly prohibited. To further enforce Trussbilt's Substance Abuse Policy, pre-employment drug testing has been established as a part of the Company's employment process.

All job applicants, in the final stages of the employee selection process, must submit to a drug test for the purpose of measuring the possible presence of drugs, alcohol or other such related substances. A job applicant will not be required to take a drug test unless a position of employment has been offered, conditional upon the passing of the required drug test and pre-employment physical. A pre-employment drug test must be completed prior to a pre-employment physical.

A job applicant may refuse to undergo drug testing. However, since a job applicant must pass a drug test to be hired by Trussbilt, a job applicant who refuses to undergo drug testing shall have any conditional job offer retracted and will not be hired.

The passing of a drug test is another step in Trussbilt's employment process. If a required pre-employment drug test reflects a positive test result, the Company will withdraw the job offer.

All drug tests must be administered by a medical provider selected by Trussbilt and the test will be approved by the (FDA) Federal Drug Administration. All information relating to drug testing or the identification of persons as users of drugs and alcohol will be protected by Trussbilt as confidential, unless otherwise required by law or overriding public health and safety concerns or authorized in writing by the persons in question.

Upon passing the pre-employment drug test, the Company will continue the hiring process by scheduling the applicant for a pre-employment physical.

I acknowledge that I have read and understand the above information. I realize that if a job offer is extended to me by Trussbilt, I will be asked to consent to a pre-employment drug test.

Applicant's Signature

Date