

Redi-Rock International
Application for Employment
(Please Print Clearly)

An Equal Employment Opportunity Employer

Please be sure that all of your answers on this application are complete, correct, and truthful. You should understand that any omission of relevant information, any false or misleading statement, or any failure to disclose facts which, if known, might reflect unfavorably on this application, may result in dismissal even if you are employed.

Please answer every question. You will not be considered as a candidate for a job with us until we have received this application fully completed and signed by you. As required by law, Redi-Rock International does not discriminate in hiring or employment on the basis of race, color, religion, national origin, non-disqualifying disability, sex, age, height, weight, or other legally protected characteristic.

PERSONAL INFORMATION			
Today's Date	Date Available	Phone Number ()	Alternate Phone Number ()
Last Name (copy name as it appears exactly on social security card or other work eligibility documents)		First Name	Middle Initial
Street Address	City	State	Zip Code

Are you 18 years of age or older? Yes No

Have you ever been convicted of any crime other than a routine traffic offense? (Includes a "no contest" or "guilty" plea)? Yes No

If yes, explain: _____

Are you currently under indictment or charged with a felony? Yes No (A conviction does not automatically bar you from employment)

If yes, explain: _____

Have you ever had an application for surety bond refused? Yes No

Are you able to do the essential functions of the job(s) for which you are applying? Yes No

If no, please identify the applicable functions: _____

EMPLOYMENT DESIRED	
TYPE OF WORK DESIRED	SALARY REQUESTED
First Choice	
Second Choice	

Will you accept employment of: Full-time Part-time On-Call Temporary -- for how long? _____

Have you had any periods of unemployment? Yes No

If yes, please explain and give dates: _____

If you are now employed, why do you want to change your job? _____

Have you ever been fired, dismissed, asked to resign, resigned by mutual agreement, or otherwise been terminated from any job? Yes No If yes, what job and why?

Please list any skills, abilities, hobbies, training, honors received, etc. that you feel may be an asset and are related to the position for which you are applying. (Example: business machines, volunteer work, additional languages, data processing, clerical, etc.) _____

EMPLOYMENT HISTORY			
List below past and present employment, beginning with your most recent. Include U.S. military experience. Include summer, part-time and temporary jobs.			
COMPANY	DATES OF EMPLOYMENT	PAY RATE	POSITION HELD JOB TITLE
Name Address City, State	From: / / To: / /	To Start: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Immediate Supervisor / Supervisor's Title	Reason for Leaving	Upon Leaving: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	Job Responsibilities (be specific)
Work Telephone: ()	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, why not?		
COMPANY	DATES OF EMPLOYMENT	PAY RATE	POSITION HELD JOB TITLE
Name Address City, State	From: / / To: / /	To Start: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Immediate Supervisor / Supervisor's Title	Reason for Leaving	Upon Leaving: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	Job Responsibilities (be specific)
Work Telephone: ()	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, why not?		
COMPANY	DATES OF EMPLOYMENT	PAY RATE	POSITION HELD JOB TITLE

Name Address City, State	From: / / To: / /	To Start: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
Immediate Supervisor / Supervisor's Title	Reason for Leaving	Upon Leaving: \$ _____ <input type="checkbox"/> Hr <input type="checkbox"/> Wk <input type="checkbox"/> Yr	Job Responsibilities (be specific)
Work Telephone: ()	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, why not?		

PROFESSIONAL LICENSES / CERTIFICATIONS / MEMBERSHIPS				
Type	Organization or State Issued	Date Issued	Number	Verification

Member of professional organizations: _____

EDUCATION / COURSE OF STUDY			
Type of School	School Name / Location	Did you graduate?	Course of study / Degree received
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Technical, Business or Other		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post Graduate		<input type="checkbox"/> Yes <input type="checkbox"/> No	

List any scholastic honors received: _____

List any special certification, skills, knowledge, or experience which you feel may be relevant to the job you are seeking: _____

Have you ever served in the US Armed Forces or the Reserves? If so, when? _____

REFERRAL

List any friends or relatives working for Redi-Rock International.

1) Name: _____ Relationship: _____

2) Name: _____ Relationship: _____

REFERENCES

Name	Relationship to you	Number of years acquainted	Telephone Number

CERTIFICATION AND AGREEMENT

PLEASE READ CAREFULLY AND SIGN BELOW IF YOU AGREE TO THESE TERMS OF EMPLOYMENT

- 1. Certification of Truthfulness:** I represent that all my statements in support of my Application for Employment are true and complete. I understand and agree that if Redi-Rock International at any time should determine that any requested information was withheld by me or any of my statements are false or misleading, I may be discharged.
- 2. Employment at Will:** If hired by Redi-Rock International, I agree to comply with all rules, regulations, policies, and communications directed to employees, including any changes made from time to time. I understand that I will be free to resign my employment at any time with or without cause, and with or without prior notice or warning to Redi-Rock International; I agree that Redi-Rock International also may terminate my employment at any time, with or without cause and with or without prior review, notice, or warning.
- 3. Limitation on Claims:** I agree that any lawsuit against Redi-Rock International and/or its agents arising out of my employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within the following time limits or be forever barred: (a) for lawsuits requiring a Notice of Right to Sue from the EEOC, within 90 days after the EEOC issues that Notice; or (b) for all other lawsuits, within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. I waive any statute of limitations that exceeds this time limit.
- 4. Authorization to Work:** If I am selected for hire, I will be offered employment provided I certify and produce applicable documentation that I am authorized to work as required by the Immigration Reform and Control Act of 1986.
- 5. Need For Accommodation:** If I, due to a physical or mental disability, require an accommodation to perform the job for which I may be selected, I understand that I must give Redi-Rock International written notice of that need within 182 days after I know or reasonably should have known that an accommodation is needed. Failure to do so may bar me from alleging that Redi-Rock International has not accommodated me as required by law.

Redi-Rock International Application for Employment

6. Background Information: I authorize verification of all information provided on this application and during employment interviews. I authorize and request all persons, companies, and organizations (including credit bureaus, investigative agencies, schools, and law enforcement agencies) to furnish any information about me as requested by Redi-Rock International. I release from liability any person, employer, company, or organization furnishing such information. I understand results of my background check may be used in determining an offer of employment and other employment decisions.

7. Drug and Alcohol Testing: I agree to provide Redi-Rock International with appropriate specimens to test for the presence of drugs or other controlled substances. I understand that decisions concerning my employment will be made as a result of these tests.

8. Physical Exam and Release of Medical Information: I understand that any job offer will be conditioned on passing a physical exam. I authorize every medical doctor, physician or other health care provider (HCP) to provide any and all information, including but not limited to medical reports, laboratory reports, X-rays or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test or evaluation. I will cooperate in obtaining any additional authorization required by any HCP for release of any information. I hereby release every HCP and every other person, firm, officer, corporation, association, organization or institution which shall comply with the authorization or request made in this respect from any and all liability for disclosure made pursuant to my authorization. I understand that medical information will not be requested from me, my physician or other HCP until a job offer has been made.

9. Disclosures: I agree that the contents of any offices, work spaces, desks, computer and computer generated data, any Redi-Rock International property I may be using, and any of my own property I bring onto Redi-Rock International premises, may be inspected by Redi-Rock International at any time it determines there is reasonable cause to do so, and I waive and promise not to make any claims against Redi-Rock International (or its employees or agents) relating to such inspection. I agree that, except as directed otherwise in writing by Redi-Rock International, I will not disclose to anyone or use for my own purposes, any of Redi-Rock International's confidential or proprietary information, either during or after my employment. I understand and agree that client names and information, financial data, computer information and processes are confidential and proprietary information and I will not make written or other copies or notes regarding these matters except as necessary to perform my job. I agree that if my employment ends, I will deliver to Redi-Rock International all material of any kind that I have relating to its business, including any such copies or notes. I agree that if any of the above commitments by me is ever found to be legally unenforceable as written, the particular agreement concerned shall be limited to allow its enforcement as far as legally possible.

10. Consideration for Employment and Conditions of Employment: I understand that submitting this application for consideration does not in any way obligate Redi-Rock International to hire me. I agree to the above terms of employment if I am employed by Redi-Rock International. Should I be employed, I understand and agree that these provisions of my employment can be revised only by a signed contract authorized by a written resolution of Redi-Rock International, and that no person in Redi-Rock International has any authority to offer employment other than on an at-will basis as described above. I understand that if I am employed, it will be on an in-training basis for a minimum period of 90 days. This period may be extended if deemed necessary by my supervisor(s). I understand that conditions of employment may require me to temporarily work shifts other than that for which I am hired and agree to such scheduling changes as directed by my department head or administrator. I understand and agree that, except as provided above, all compensation, benefits, programs, rules, and policies of Redi-Rock International are subject to exception or change at any time as decided by Redi-Rock International in its sole discretion.

11. Reference: Upon termination of employment, I authorize the release of reference information regarding my work.

I understand that I may take this application form with me to submit at a later time if I choose to do so. I acknowledge by my signature that I have been given adequate time to read, complete, and review my application and this certification, and I have knowingly and voluntarily signed below.

I have read and understand the items listed in the Application for Employment, including this page, and acknowledge that with my signature below.

Signature of Applicant _____

Date _____

AUTHORIZATION

Name	Social Security Number	Number of Years in Michigan	Driver's License/State Issued ID		
			<i>Number</i>	<i>State</i>	<i>Expiration Date</i>
Previous residence within or outside of Michigan:					
<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip</i>	<i>County</i>	

This authorization and waiver is part of my written application for employment with Redi-Rock International.

I authorize all employers and educational institutions where I am or have been employed or enrolled, and all law enforcement agencies, to disclose to Redi-Rock International any and all information in their possession about my employment history (including disciplinary and other matters), personal background, and/or credit background. I further authorize all educational institutions I have attended to disclose to Redi-Rock International any and all information in their possession regarding my attendance and performance at such institution, including but not limited to: disclosure of any diploma or degree of certification awarded; disclosure of academic information and transcripts; and disclosure of any disciplinary record.

I understand that, as a condition of my consideration for employment with Redi-Rock International, or as a condition of my continued employment with Redi-Rock International may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics and trustworthiness.

I hereby authorize and consent to Redi-Rock International's procurement of such a report. I understand that, pursuant to the federal Fair Credit Reporting Act, Redi-Rock International will provide me with a copy of any such report if the information contained in such report is, in any way, to be used in making a decision regarding my fitness for employment with Redi-Rock International. I further understand that such report will be made available to me prior to any such decision being made, along with the name and address of the reporting agency that produced the report.

For purposes of this Authorization, a photocopy of my signature shall have the same force and effect as my original signature.

Signature _____

Date _____

AFFIRMATIVE ACTION QUESTIONNAIRE
(Confidential and Voluntary)

Date: _____

Location: _____

The Company is committed to an Affirmative Action Program which includes giving full consideration for employment to qualified individuals without regard to race, color, religion, gender or national origin. The following information is being requested of all applicants for employment. You're providing this information is strictly voluntary. The self-identification request is made in compliance with the regulations issued by the U.S. Department of Labor. Responses will be used for the purpose set forth in these regulations. Its purpose is to assist the Company in monitoring its Affirmative Action Program and to aid in complying with required Governmental record keeping and periodic reporting. A copy of the AAP is available during normal business hours (call your local personnel office).

This information is not part of the employment application. It will be processed separately and will not be considered in the employment/selection process. If you choose to provide information, please complete the following:

Name: _____ Sex* Male Female Social Security Number: _____

Job Applied for: _____

RACE/ETHNICITY (check one)*:

- American Indian or Alaskan Native** - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment
- Asian** - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam
- Black or African American** - A person having origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- White** - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Hispanic or Latino (All races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- Hispanic or Latino (White race only)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the White race.
- Hispanic or Latino (all other races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.

APPLICANT SOURCE OF RECRUITMENT (check one)

- | | |
|--|--|
| <input type="checkbox"/> Newspaper Advertising | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Walk-In | Name of Agency _____ |
| <input type="checkbox"/> Campus Recruiting | <input type="checkbox"/> Public Employment Agency |
| <input type="checkbox"/> Employee Referral | Name of Agency _____ |
| <input type="checkbox"/> Military | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Acquisition | <input type="checkbox"/> Other _____ |

* To comply with OFCCP regulations, a visual observation may be made to gather the above demographic data.