



C.I. SERVICES, INC. / CIS ROOFING, INC.

Your Resource for Roofing & Waterproofing Solutions

Commercial · Industrial · Residential

APPLICATION FOR EMPLOYMENT

Today's Date _____

This application for employment is confidential and for the exclusive use of C.I. Services.

Please print in BLUE or BLACK ink. Please use the reverse side or additional sheets to add information as necessary.

Name _____ Soc. Sec. No. _____
Last First Middle

Date of Birth: _____

Address _____ City: _____ State: _____ Zip: _____

Telephone Day (_____) _____ Evening (_____) _____

Driver's License No. _____ State _____ Expiration Date _____

Position applied for: _____ Date you're available for work: _____

Are you available: Full-Time Part-Time Days Evenings

Desired salary range \$ _____ Can you travel if a job requires it? Yes No

Please tell us how you were referred to C.I. Services:

Employee of C.I. Services (Please give name/s) _____

Advertisement Agency Other (please specify) _____

Have you ever worked for C.I. Services as a temporary employee? Yes No If yes, please complete the following:

Agency Name Position/s You Held Dates worked

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Have you ever been employed by C.I. Services? Yes No If yes, please complete the following:

Position/s You Held Dates Employed

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Have you ever applied for employment with C.I. Services before? Yes No If yes, please complete the following:

Position Result Date/s Applied

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LEGAL REQUIREMENTS FOR EMPLOYMENT

Pursuant to the Immigration Reform and Control Act of 1986, upon your first day of employment, will you sign the form required by the Immigration and Naturalization Service (the "I-9" form) stating that you are authorized to work in the United States of America. In addition, will you provide documents to C.I. Services for examination which verify your identity and work authorization or, in lieu of a work authorization document, will you attest to C.I. Services that you intend to apply or have applied for legalization under the Immigration Reform and Control Act of 1986? In summary, can you, after employment, submit verification of your legal right to work in the United States? Yes No

If you are under 18, can you provide required proof of your eligibility to work? [] Yes [] No

Have you ever been convicted of a felony or a misdemeanor, excluding misdemeanor marijuana-related offenses more than two years old, which resulted in a fine, suspended sentence, community service or imprisonment? [] Yes [] No

(A "Yes" answer is not necessarily a bar to your employment.)

If yes, describe in full: _____

Are you for any reason presently unable to perform the essential functions of the job for which you are applying?

[] Yes [] No If yes, please describe specific work limitation: _____

EDUCATION

	Name & Address of School	Course of Study	Years Completed	Diploma or Degree
Grammar School				
High School				
College				
Trade/ Other				

EMPLOYMENT HISTORY

Starting with your most recent position, please list your last four employers. Please complete this form even if you have provided a resume to us. Please note that if you worked for a company through a temporary agency for more than a few weeks, you should provide the names of the agency and the company where you worked.

1. Employer Name	Date/s Employed	Starting \$ Final \$
Address	Telephone Number	Supervisor Name/ Title
Job Title	Work Performed	Reasons for Leaving
May we contact this employer for reference? [] Yes [] No If not, please explain.		

2. Employer Name	Date/s Employed	Starting \$ Final \$
Address	Telephone Number	Supervisor Name/ Title
Job Title	Work Performed	Reasons for Leaving
May we contact this employer for reference? [] Yes [] No If not, please explain.		

3. Employer Name	Date/s Employed	Starting \$ Final \$
Address	Telephone Number	Supervisor Name/ Title
Job Title	Work Performed	Reasons for Leaving
May we contact this employer for reference? [] Yes [] No If not, please explain.		

4. Employer Name	Date/s Employed	Starting \$ Final \$
Address	Telephone Number	Supervisor Name/ Title
Job Title	Work Performed	Reasons for Leaving
May we contact this employer for reference? [] Yes [] No If not, please explain.		

Describe any specialized training, apprenticeship, skills (including computer skills) or additional information you feel may be helpful to us in considering your application.

PERSONAL REFERENCES

Please provide three personal references we may contact.

Name	Address & Daytime telephone number	Relationship	Years known
1.			
2.			
3.			

AUTHORIZATION

I certify that answers given herein are true and complete to the best of my knowledge. I understand that misrepresentation or the purposeful omission of facts called on this form is reason to disqualify me from further consideration and may be grounds for termination no matter when the misrepresentation or omission is discovered.

You are hereby authorized to verify my prior education or employment history and to contact my personal and professional references (unless otherwise noted above). I authorize investigation of all statements contained in this application for employment as may be necessary in arriving in an employment decision.

Employment with C.I. Services has no specified term or length. I understand that this policy of at will employment supercedes any previous statement regarding my employment and may not be changed or modified except by a written agreement signed by me and an authorized representative of the company. "At will" employment means that the Employee may resign at anytime and the Employer may discharge the Employee at any time with or without cause.

Signature of Applicant

Date

RELEASE OF LIABILITY

I hereby grant permission to C.I. Services to contact my former employer(s) for employment verification, and I release my former employer(s) from liability because of furnishing said information.

Date

Signature

Thank you for completing this application form. We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.