



# Employment Application

Isla Coatings & Roofing Supply ("the Company") is committed to a policy of nondiscrimination and equal opportunity for all qualified employees and qualified applicants without regard to race, creed, color, national origin, sex, religion, age, disability, sexual orientation, genetic predisposition or carrier status, membership in the armed services, marital status, or any other characteristic protected by applicable federal, state, or local law.

**PLEASE PRINT - BE SURE TO SIGN THIS APPLICATION**

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Position Applied for	Date Available	Desired Salary	
Are you available to work? <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary			
Can you travel, if the job requires it? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you a citizen of the United States? <b>YES / NO</b> If no, are you authorized to work in the U.S.? <b>YES / NO</b>			
<i>Please remember that having an H1-B visa does not constitute authorization to work in the United States for any employer other than the employer who sponsored you for the H1-B visa.</i>			
<i>Pursuant to the Immigration Reform and Control Act of 1986, all applicants, upon being made an offer of employment, must produce documents, which are specified by the federal government, establishing their identity and authorization for employment in the United States. These documents must be produced no later than seventy-two (72) hours after commencement of employment. You will also be required to sign Form I-9 (issued by the federal government) verifying, under oath, your employment authorization.</i>			
Have you ever worked for this company? <b>YES / NO</b> If so, when?			
Have you ever been convicted of a felony? <b>YES / NO</b> If yes, explain			
PROFESSIONAL STATUS/LICENSES			
List and describe any special professional societies or accomplishments (such as published articles, special studies made, fellowships, honors or recognitions received) include P.E. registrations and states if appropriate.			
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If no, describe the functions that cannot be performed:			
CERTIFICATIONS			
Certification Name: _____			
Certification Authority: _____			
List any other training, qualifications or skills which you feel make you especially suited to work for the Company:			
EDUCATION			
High School		Address	
From	To	Did you graduate?    YES    NO	Degree
College		Address	
From	To	Did you graduate?    YES    NO	Degree
Other		Address	
From	To	Did you graduate?    YES    NO	Degree

**REFERENCES**

Please list three professional references.

Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	

**PREVIOUS EMPLOYMENT**

Company	Phone (     )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?     YES     NO		
Company	Phone (     )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?     YES     NO		
Company	Phone (     )	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? <input type="checkbox"/> YES <input type="checkbox"/> NO		

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview release.

_____	_____
Signature	Date

I understand that this application is only valid for the position applied for at the present time and that Isla Coatings & Roofing Supply is not obligated to retain or consider this application for future openings. \_\_\_\_\_ **Initial**

If employed by the Company, I agree that I will abide by all Company policies and rules. I acknowledge that, except for the condition that my employment shall be at-will, Company policies and rules may be changed, interpreted, withdrawn, or supplemented by Isla Coatings & Roofing Supply at any time, with or without prior notice to me. \_\_\_\_\_ **Initial**

I agree and understand that if I am offered a position at the Company, it will be offered on the condition that my employment shall be at-will and for no definite period and that I have no express or implied contractual rights to continued employment with the Company. I understand that just as I have the right to terminate my employment at any time, for any or no reason, Isla Coatings & Roofing Supply also has the right to terminate my employment at any time, for any or no reason, with or without cause or notice. Your work schedule and job duties are subject to modification by Isla Coatings & Roofing Supply at any time. I understand that, except for the President/CEO of the Company, no supervisor or manager may alter or amend the conditions stated in this paragraph. Only the President/CEO of Isla Coatings & Roofing Supply has authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in writing and recorded with the Human Resources/Administrator. \_\_\_\_\_ **Initial**

I certify that the statements contained herein are true, complete and correct, to the best of my knowledge. I understand that any falsification, misrepresentation or omission of information shall be sufficient reason to withdraw an offer or discharge me if employed. \_\_\_\_\_ **Initial**

By signing and submitting this application for employment, I acknowledge and agree to submit to binding arbitration all disputes between myself and Isla Coatings & Roofing Supply or any of its affiliates, including, but not limited to, those relating to the employment application process, corporate due diligence specialists' investigation, if any, into my background, the terms and conditions of my employment (if hired), the termination of my employment with the Company, any alleged violations of federal, state, and/or local statute, any claims based on any purported breach of duty arising in contract, tort or statute, including breach of contract, breach of the covenant of good faith and fair dealing, violation of statutory, contractual or commonlaw rights, but excluding workers' compensation claims, unemployment insurance matters, and any matter with the exclusive jurisdiction of the state labor commissioner

Neither the acceptance of your application nor hiring nor discussion leading to hiring nor continuance of employment is to be construed as a contract of employment, a promise of continued employment, or as creating an implied or contractual duty between you and the Company. Your employment can be terminated by you or by Isla Coatings & Roofing Supply at any time with or without cause and with or without notice. Any representation by any person to the contrary is null and void, except a written contract executed by the President of Isla Coatings & Roofing Supply. Your work schedule and job duties are subject to modification by Isla Coatings & Roofing Supply at any time. Your signature below acknowledges your understanding of these conditions.

**APPLICANT -- PLEASE SIGN AND DATE HERE**

Signature	Date
-----------	------



ew may result in