

# Employment Application Form Page 1 of 4

We are an Equal Opportunity employer. This application is valid for 60 days.

**Instructions (Please Read):** Please read carefully, write clearly, and answer all questions completely. Only candidates that fully complete all sections of this application will be considered for employment, although responding to any questions marked as being *voluntary* is optional. Not all applicants will be interviewed; only those interviewed will receive a response back. If you require any accommodation(s) during your employment interview, please request such in advance of the interview.

12.04.2017

## 1 Applicant Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
LAST NAME FIRST NAME MIDDLE NAME

Address: \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

How long have you lived at the above address: \_\_\_\_\_

Primary Personal Phone No: \_\_\_\_\_ Email Address: \_\_\_\_\_

For what position are you applying: \_\_\_\_\_ Date available: \_\_\_\_\_

Work Hours Desired: \_\_\_\_\_ Check all that apply:  Full Time  Part Time  Temp.

Can you work any day of the week, if required:  Yes  No. If No, indicate days **not** available: \_\_\_\_\_

Will you work overtime, if requested:  Yes  No. Pay Expected: \_\_\_\_\_ per (check one)  Hour  Month  
Total hours and schedule are at discretion of management

## 2 Employment History

**Instructions (Please Read):** List most recent employer first. Account for all occupied and unoccupied time during the past ten years. Attach extra pages if necessary. It is unacceptable to put only "see resume" in any section.

**If currently employed, state why you are seeking other employment under "Reason for leaving".**

May we contact your present employer:  Yes  No

### Job 1

Employer Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_ Start month/year: \_\_\_\_\_

Most Recent Supervisor: \_\_\_\_\_ End month/year: \_\_\_\_\_

Job Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Major Responsibilities: \_\_\_\_\_

### Job 2

Employer Name: \_\_\_\_\_ Phone No: \_\_\_\_\_

Address: \_\_\_\_\_ Start month/year: \_\_\_\_\_

Most Recent Supervisor: \_\_\_\_\_ End month/year: \_\_\_\_\_

Job Title: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Major Responsibilities: \_\_\_\_\_

<b>Job 3</b>	Employer Name: _____	Phone No: _____
Address: _____		Start month/year: _____
Most Recent Supervisor: _____		End month/year: _____
Job Title: _____		
Reason for leaving: _____		
Major Responsibilities: _____		

<b>Job 4</b>	Employer Name: _____	Phone No: _____
Address: _____		Start month/year: _____
Most Recent Supervisor: _____		End month/year: _____
Job Title: _____		
Reason for leaving: _____		
Major Responsibilities: _____		

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### **3 Education**

<b>High School</b>	Most recent High School: _____
Location of School (City & State): _____	
Completion Status (check one): <input type="checkbox"/> Graduated <input type="checkbox"/> GED <input type="checkbox"/> Did not graduate; grade completed: _____	

<b>Undergrad. College (incl. Jr. College)</b>	Most recent school: _____
Location of School (City & State): _____	
Completion Status (select one): <input type="checkbox"/> Graduated <input type="checkbox"/> Did not graduate, but years completed: _____	
Major Subject(s): _____	

<b>Postgraduate College</b>	Most recent school: _____
Location of School (City & State): _____	
Completion Status (select one): <input type="checkbox"/> Graduated <input type="checkbox"/> Did not graduate, but years completed: _____	
Major Subject(s): _____	

<b>Technical or Vocational School</b>	Most recent school: _____
Location of School (City & State): _____	
Completion Status (select one): <input type="checkbox"/> Graduated <input type="checkbox"/> Did not graduate, but years completed: _____	
Major Subject(s): _____	

Are you currently enrolled in school:  Yes  No. What school: \_\_\_\_\_

List main subjects you are currently studying: \_\_\_\_\_

If you are *not* currently enrolled, do you plan on enrolling:  Yes  No. If Yes, complete next line:

What subjects do you plan on studying and where: \_\_\_\_\_

Do you possess a professional or trade license or certificate:  Yes  No. If Yes, identify below:

Type: \_\_\_\_\_ Issued by: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Type: \_\_\_\_\_ Issued by: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Type: \_\_\_\_\_ Issued by: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Please list any specific work skills that you may possess that have not been listed above, including languages, and proficiency with specific computers and software:

\_\_\_\_\_  
\_\_\_\_\_

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## **4** **Military** *Answering the next two questions is strictly voluntary*

1. Are you a veteran:  Yes  No. 2. What skills acquired during military service may be of interest or value to us: \_\_\_\_\_

\_\_\_\_\_

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## **5** **Personal**

If hired, can you submit proof of identity and legal right to work in the United States:  Yes  No

Are you **under** 18 years of age:  Yes  No

If "Yes", can you provide a work permit or other proof of your right to work:  Yes  No

Do you have a valid Driver License:  Yes  No

If Yes, from what state: \_\_\_\_\_

Have you ever lost or been denied a security clearance:  Yes  No

If Yes, explain: \_\_\_\_\_

List names of any relatives or acquaintances employed by our company: \_\_\_\_\_

\_\_\_\_\_

List any professional organizations to which you belong that relate to the position for which you are applying:

\_\_\_\_\_

\_\_\_\_\_

List two references (not a relative or former employer) whom you have know for at least five years:

NAME	OCCUPATION	PHONE	EMAIL
NAME	OCCUPATION	PHONE	EMAIL

## 6 Agreement

READ & INITIAL

*Instructions (Please Read):* By initialing each paragraph, I am indicating that I have fully read and understood the paragraph. By signing below, I am agreeing to all of the following:

- 6.1 \_\_\_\_\_ I attest under penalty of perjury that I am applying for employment in good faith with the intention of accepting a position, if offered. I also affirm that the information contained in this application is true, complete, and accurate.
- 6.2 \_\_\_\_\_ I authorize investigation of all statements contained in this application form if I am considered for employment. I also authorize previous employers, personal references named, or any other person to whom the company may refer, to give any and all information regarding my employment or scholastic standing together with any other information, personal or otherwise, that may or may not be on their records. I further consent to the review of all publicly-posted material on social media sites and agree that such material may be considered in deciding whether to offer employment. I understand that I am not required to provide any passwords to facilitate any review of social media.
- 6.3 \_\_\_\_\_ I understand that misrepresentation or omission of any facts called for herein, receipt of unsatisfactory references, or failure to pass a prescribed medical examination if required for the position, will be sufficient cause for disqualification from employment or for my dismissal from the company's service if I have been employed.
- 6.4 \_\_\_\_\_ I understand that offers of employment may be contingent on a satisfactory background check, including a review of my criminal history. No applicant will be denied employment solely on the grounds that they have been charged, committed, or been convicted (or pleaded guilty or no contest) of a criminal offense. The nature of the offense, the dates of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for will be considered.
- 6.5 \_\_\_\_\_ I understand and agree that nothing contained in this application, or conveyed during any interview which may be granted, or during my employment if hired, is intended to create an employment contract between me and the company. In addition, **I understand and agree that if hired, my employment will be "at-will," for no definite or determinable period of time, and may be terminated at any time, for any reason or for no reason at all, with or without prior notice, at the option of the company or me.** I understand and agree that no promises or representation contrary to this "at-will" condition are binding on the company, and that I have not relied, and will not rely, on any oral or written statements to the extent that such might even suggest that my status is anything other than "at-will." I further understand and agree that my "at-will" status cannot be changed except by a written document specifically addressing my "at-will" status, and signed by a specifically authorized officer of the company. I agree that it is my responsibility to confirm the authorization of any person signing such a document, since I understand the company's intent is not to enter into any employment arrangements other than "at-will."
- 6.6 \_\_\_\_\_ I understand and agree that this is the entire agreement between me and the company regarding the term of my employment and replaces any other oral or written agreement or understanding. I further agree that all of this agreement is a part of any employment relationship I may have with the company and is hereby merged and integrated into any agreement or understanding regarding my employment.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate document entitled **DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT** and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by SAES Pure Gas, Inc. (“Employer”) at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Verified First, 1550 South Tech Lane, Suite 200, Meridian, Idaho 83642; Tel. # 1-888-670-9564; www.VerifiedFirst.com and/or Employer.** I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

**New York applicants only:** Upon request, you will be informed whether or not a consumer report was requested by the Employer, and if such report was requested, informed of the name and address of the consumer reporting agency that furnished the report. You have the right to inspect and receive a copy of any investigative consumer report requested by the Employer by contacting the consumer reporting agency identified above directly. By signing below, you acknowledge receipt of Article 23-A of the New York Correction Law.

**New York City applicants only:** You acknowledge and authorize the Employer to provide any notices required by federal, state or local law to you at the address(es) and/or email address(es) you provided to the Employer.

**Washington State applicants only:** You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

**Minnesota and Oklahoma applicants only:** Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Employer.

## PLEASE COMPLETE ALL FIELDS BELOW

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b> <small>check box if no middle name</small> <input type="checkbox"/>
<small>DO not provide Social Security Number or Date of Birth. This information will be needed when/if conditional offer of employment is given</small>		
<b>Social Security Number*</b> ###-##-####	<b>Date of Birth*</b> month/date/year	<b>Email Address</b> <small>required</small>
<b>Driver's License Number</b>	<b>Issuing State*</b>	<b>Must List All Former Names/Aliases Previously Used -</b> <span style="border: 1px solid black; padding: 2px;">List 'None' if no Alias used.</span> <small>separate aliases with comma</small>

\*This information will be used for background screening purposes only and will not be used as hiring criteria until after conditional offer of employment has been made.

### CURRENT ADDRESS

<b>Street</b>	<b>Apt/Unit</b>
<b>City</b>	<b>State</b>
	<b>Zip</b>

### FORMER EMPLOYER

<b>Company</b>	<b>City, State</b>
<b>Position</b>	<b>Dates of Employment</b>

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

## NOTICE REGARDING BACKGROUND CHECKS PER CALIFORNIA LAW

SAES Pure Gas, Inc. (the "Company") intends to obtain information about you for employment screening purposes from a consumer reporting agency. Thus, you can expect to be the subject of "investigative consumer reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be **Verified First, 1550 South Tech Lane, Suite 200, Meridian, Idaho 83642; Tel. # 888.670.9564; [www.verifiedfirst.com](http://www.verifiedfirst.com)**. The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under California Civil Code section 1786.22, you are entitled to find out what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection. You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

Please check this box if you would like to receive a copy of an investigative consumer report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

### Notice Regarding Credit Checks:

Pursuant to Section 1024.5 of the California Labor Code, the Company informs you that it may obtain a credit report about you from the above named entity, because you are seeking to work in the following position:

An employee covered by the executive exemption set forth in subparagraph (1) of paragraph (A) of Section 1 of Wage Order 4 of the Industrial Welfare Commission;

A position in the state Department of Justice;

A sworn peace officer or other law enforcement;

A position for which the information contained in the report is required by law to be disclosed or obtained;

A position that involves regular access to specified personal information for any purpose other than the routine solicitation and processing of credit card applications in a retail establishment, such as bank or credit card account information, social security number, or date of birth;

A position which the person can enter into financial transactions on behalf of the company;

A position that involves access to confidential or proprietary information;

A position that involves regular access to \$10,000 or more of cash; or

The Company **will not** obtain a consumer credit report on you.

# APPLICANT COPY

## A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

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

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](http://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](http://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](http://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](http://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](http://www.consumerfinance.gov/learnmore).

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## A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

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
<p>1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates</p> <p>b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:</p>	<p>a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552</p> <p>b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>
<p>2. To the extent not included in item 1 above:</p> <p>a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks</p> <p>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</p> <p>c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations</p> <p>d. Federal Credit Unions</p>	<p>a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050</p> <p>b. Federal Reserve Consumer Help Center P.O. Box. 1200 Minneapolis, MN 55480</p> <p>c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106</p> <p>d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314</p>
<p>3. Air carriers</p>	<p>Asst. General Counsel for Aviation Enforcement &amp; Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590</p>
<p>4. Creditors Subject to the Surface Transportation Board</p>	<p>Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423</p>
<p>5. Creditors Subject to the Packers and Stockyards Act, 1921</p>	<p>Nearest Packers and Stockyards Administration area supervisor</p>
<p>6. Small Business Investment Companies</p>	<p>Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., 8th Floor Washington, DC 20416</p>
<p>7. Brokers and Dealers</p>	<p>Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549</p>
<p>8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations</p>	<p>Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090</p>
<p>9. Retailers, Finance Companies, and All Other Creditors Not Listed Above</p>	<p>FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357</p>

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