



# Rubber Lining Specialists, LLC.

## Employment Application

### APPLICANT INFORMATION

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_ Apt # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Date Available to Start Working \_\_\_\_\_ Desired Salary \_\_\_\_\_

Position Applied for \_\_\_\_\_

Are you a citizen of the United States? Yes  No  If no, are you authorized to work in the U.S.? Yes  No

Have you ever worked for this company? Yes  No

This employment requires travel; do you have a valid driver's license? Yes  No

### REFERENCES

*Please list two professional references.*

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_

### TRAINING AND CERTIFICATIONS

*Please list any training or certifications that you may have. For example: ISTC, TWIC, etc.*

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**PREVIOUS EMPLOYMENT**

Company \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
Job Title \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_  
Responsibilities \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact this company for a reference? Yes  No

Company \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
Address \_\_\_\_\_ Supervisor \_\_\_\_\_  
Job Title \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Ending Salary \$ \_\_\_\_\_  
Responsibilities \_\_\_\_\_  
From \_\_\_\_\_ to \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact this company for a reference? Yes  No

**Applicant Drug and Alcohol Testing Consent**

As a prerequisite to employment, I hereby agree to allow Rubber Lining Specialists, LLC or its designated agent to collect **hair follicle, urine and oral samples** from me to determine the presence of illegal drugs in my body. Further, I give my consent to release my test results to authorized Rubber Lining Specialists, LLC for appropriate review, and authorize Rubber Lining Specialists, LLC to use the test results as a defense to any legal action to which I am a party. I understand the results of the drug testing, if confirmed positive, will remove me from consideration for employment. I also understand that if I refuse to consent, I will be removed from further consideration. Further, I understand that, if employed Rubber Lining Specialists, LLC, I must abide by the terms of Rubber Lining Specialists, LLC drug-free work place policy and can be required to submit to periodic testing for the presence of illegal drugs and/or alcohol. I understand that submission to such testing is a condition of employment with Rubber Lining Specialists, LLC, and disciplinary action, up to and including discharge, may result if (1) I refuse to consent to testing; (2) I refuse to execute all forms of consent and releases of liability as are usually and reasonably required of such examination; (3) I refuse to authorize release of the test results to Rubber Lining Specialists, LLC (if the results establish a violation of Rubber Lining Specialists, LLC drug-free workplace policy); or (4) I otherwise violate the policy.†

I consent to the administration of the drug and alcohol test and to the terms of the consent agreement.†

I refuse the drug and alcohol detection test.

**Background Check Consent**

I, \_\_\_\_\_, hereby authorize Rubber Lining Specialists, LLC to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Rubber Lining Specialists, LLC will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

\_\_\_\_\_  
Signature of Employee

\_\_\_\_\_  
Date

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to an employment offer, I understand the offer is contingent upon the results of my drug screening and background check results.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature \_\_\_\_\_

Date \_\_\_\_\_