SANTAROSSA MOSAIC & TILE CO., INC.

APPLICATION FOR EMPLOYMENT-FIELD

To Applicant: We appreciate your interest in applying for employment with Santarossa Mosaic & Tile Co., Inc. Your background and work history will assist us in reviewing you qualifications.

PERSONAL INFORMATION

Name: Last First M.I.

_____

Present Address: No. and Street or Apt# City State Zip

_____

Telephone No. Alternate Telephone No.

_____ _____

EMPLOYMENT INFORMATION

Type of Position desired: _____

Employment desired: Full-Time ◉ Part-Time ○

Date Available to begin work: _____

Hours/Days & Shifts **NOT** available to work: _____

Expected Salary/Hourly Rate: $_____

Are you eligible to work in the U.S.? ○ Yes ○ No

If not a U.S. citizen, state visa type: _____

Are you on layoff or subject to recall? ○ Yes ○ No

Can you work overtime? ○ Yes ○ No

EDUCATION

High School	Address	Last Year Completed	Degree
_____		1 ○ 2 ○ 3 ○ 4 ○	_____
College/Trade	Address	Last Year Completed	Degree
_____		1 ○ 2 ○ 3 ○ 4 ○	_____
Technical/Trade	Address	Last Year Completed	Degree
_____		1 ○ 2 ○ 3 ○ 4 ○	_____

WORK EXPERIENCE

Please list your current or most recent employer first.

1. Company Name	Address	Dates Employed	Pay Rate
_____		__/__/__ to __/__/__	_____
Position	Supervisor's Name	Telephone No.	
_____	_____	_____	

Reason for leaving or wanting to: _____

2. Company Name	Address	Dates Employed	Pay Rate
_____		__/__/__ to __/__/__	_____
Position	Supervisor's Name	Telephone No.	
_____	_____	_____	

Reason for leaving or wanting to: _____

May we contact your current or past employers? ○ Yes ○ No

Do you have experience in:
lifting up to 100 lbs? ___◯ Yes ___◯ No
working in inclement weather conditions? ◯ Yes ◯ No
hand tools required for position (access to)? ___◯ Yes ___◯ No
our industry or one similar? ___◯ Yes ___◯ No
flooring work? ___◯ Yes ___◯ No
a management/supervisory capacity? ◯ Yes ◯ No

Please list any additional skills you feel relevant to the job you are applying for:

GENERAL INFORMATION
Are you currently involved with a Union (for purpose of benefits only)? _◯ Yes _◯ No
Have you ever been employed by Santarossa Mosaic & Tile Co., Inc. before? ◯ Yes ◯ No
If yes, dates of employment: From __/__/__ to __/__/__
Do you have any friends or family who are currently employed by us? _◯ Yes _◯ No
If yes, Name(s):
_____
_____
Have you ever been convicted of a felony? ___◯ Yes ___◯ No
If Yes, state the crime(s), court(s), and sentence(s):

WORK REFERENCES
Please list three individuals (other than relatives) whom we may contact for work related references:

Name	Title	Organization	Telephone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

ADDITIONAL COMMENTS

TERMS AND CONDITIONS OF APPLICATION AND EMPLOYMENT

I hereby certify that the information provided on this application is true and complete. I understand and agree that any falsification of significant omissions on this application may result in not being hired or if found out after employment may be grounds for dismissal. I understand and agree that under the terms of employment with Santarossa Mosaic & Tile Co., Inc. that the employment relationship is terminable "at will" by either party without notice or cause, unless set our in writing, dated and executed by both parties.

I understand that any offer of employment may be contingent upon my ability to comply with INS regulations establishing my identity and right to work in the United States. I understand that a pre-employment drug/alcohol screen will be part of the application process. I also understand that neither this document nor may offer employment from Santarossa Mosaic & Tile Co., Inc. constitutes an employment contract.

Further, I understand that this application will be considered active for a period of ninety days. I have read and understand the foregoing statements and accept the same as conditions of employment.

Applicant's Signature_____ Date: _____

_ _

Interviewed By: _____ Date: _____
Outcome of Interview: _____ Recommended to be hired
_____ Not recommended to be hired

If rejected, state reason: _____
_____
_____

INVITATION TO SELF INDENTIFICATION FOR
Persons With Handicaps - Special Disabled Veterans - And Veterans of the Vietnam Era

Santarossa Mosaic & Tile Co., Inc. is a Federal Contractor, subject to the requirements of the Vietnam Era Veterans Readjustment Assistance Act of 1974, as amended (38 USC 4212), and implementing regulations. These Acts and regulations require that Santarossa Mosaic & Tile Co., Inc. take affirmative action to employ, and to advance in employment, qualified persons with handicaps, special disabled veterans, and veterans of the Vietnam Era.

If you are a person with a handicap, a special disabled veteran, or veteran of the Vietnam Era, and would like to be considered under the Affirmative Action Program, please tell us. Provision of this information is voluntary. If you do not wish to identify yourself at this time as a person with a handicap, special disabled veterans, or a veteran of the Vietnam Era, you will not be subject to any adverse treatment. If you do not wish to identify yourself, the information provided will be used only in accordance with the Acts and the regulations. This means that the information provided will be:

1. Kept confidential, except that:
   a. Supervisors and managers may be informed of any restrictions on work or duties of persons with handicaps or special disabled veterans, and of any necessary accommodations.
   b. First aid and safety personnel may be informed, when and to the extent appropriate, if a particular handicap or disability may require emergency treatment.
   c. Government officials investigating compliance with the Acts shall be informed.

2. Used only in accordance with the Acts and their implementing regulations; and

3. Used to ensure proper placement. In order to assist us in making proper placement, we ask that if you have a handicap or disability which might affect your job performance or create a hazard to yourself or other in connection with the job for which you are applying, you tell us:
   a. What skills and/or procedures you use or intend to use to perform the job notwithstanding the disability, and
   b. What accommodations we could make which would enable you to perform the job properly and safely. This might include special equipment, changes in the physical layout of the job, elimination of certain non-essential duties, or other accommodations.

   I CERTIFY THAT I HAVE READ THE ABOVE "INVITATION TO SELF INDENTIFICATION" AND THAT I UNDERSTAND THE TERMS. I further attest, by checking the appropriate line and signing below, that I am:

   _____ A person with a handicap

   _____ A Special Disabled Veteran

   _____ A Veteran of the Vietnam Era

   _____ None of the above

   _____ _____
   Signature Printed Named

   _____
   Date