



# Roofing And Sheet Metal

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2149 S. 116 St. West Allis, WI 53227  
(414) 727-6100

## **EMPLOYMENT APPLICATION**

FOR

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

PHONE: \_\_\_\_\_

### **AN EQUAL OPPORTUNITY EMPLOYER**

Alois Roofing and Sheet Metal provides equal employment and advancement opportunity for all qualified individuals without discrimination because of race, color, sex, creed, religion, age, pregnancy, national origin, arrest or conviction record, military service, marital status, genetic testing, disability, sexual orientation, honesty testing, veteran status, use or nonuse of lawful products away from work or any other protected characteristic recognized under applicable state, federal or local law.

**Must fill out application completely**

Name (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Address \_\_\_\_\_

City/ST/Zip \_\_\_\_\_

Social Security # \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Position(s) for which you are applying \_\_\_\_\_

Salary requirements \_\_\_\_\_ Date available to start \_\_\_\_\_

Type of employment you are seeking (circle): FULL-TIME    PART-TIME    TEMPORARY How

were you referred to B&M? \_\_\_\_\_

Are you legally eligible to work in the U.S.? \_\_\_\_\_

(Proof of identity and eligibility will be required upon employment.)

If driving is part of the job applied for, do you have a current driver's license? (yes)\_\_\_\_ (no)\_\_\_\_

(If uncertain, please ask for verification before responding.)

Are you willing to work overtime? (yes) \_\_\_\_\_ (no) \_\_\_\_\_

**EDUCATION**

Location	From	To	Major	Degree & Date Received
High School (				
Business or Trade School(				
College(				
Graduate School(				
School activities & honors (excluding those indicating race, color, religion, sex, national origin, disability or age)				

**COMPUTER SKILLS**

Typing _____ wpm	Data Entry (alpha) _____	Data Entry (numeric) _____
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List computer program used and number of years experience with each:

Program \_\_\_\_\_ Years of experience \_\_\_\_\_

Program \_\_\_\_\_ Years of experience \_\_\_\_\_

Program \_\_\_\_\_ Years of experience \_\_\_\_\_

Program \_\_\_\_\_ Years of experience \_\_\_\_\_

Describe previous professional automotive industry experience \_\_\_\_\_  
\_\_\_\_\_

**MILITARY SERVICE**

Branch \_\_\_\_\_ Rank \_\_\_\_\_

Date \_\_\_\_\_ Status \_\_\_\_\_

**REFERENCES**

Please list three former academic or personal references familiar with your abilities. Do not list relatives or former supervisors.

Name	Occupation	Address	Phone

**ADDITIONAL INFORMATION**

Have you previously applied to Alois Roofing \_\_\_\_\_

Have you previously work for Alois Roofing \_\_\_\_\_

Do you now have or have you previously had relatives employed at Alois Roofing \_\_\_\_\_

If yes, please explain \_\_\_\_\_

Have you been convicted of an offense other than a minor traffic violation \_\_\_\_\_

If yes, please explain the circumstances of the conviction \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**[A conviction will not necessarily disqualify you from employment. It will be considered only as it may relate to the job you are seeking.]**

**INTERESTS**

Please describe your interest in Alois Roofing and Sheet Metal and the skills and aptitudes that qualify you for a position. In describing your interests, you may wish to include civic and community activities, professional societies, licenses and certifications. However, you may exclude those indicating race, color, religion, sex national origin, disability or age or any other legally protected characteristic.

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

**EMPLOYMENT HISTORY** (List more recent first. Explain any periods of unemployment.)

<b>Name of Employer</b>	Telephone
Address	Employed (MO/YEAR) From To
Supervisor's Name	May we contact? <b>YES</b> <b>NO</b>
Responsibilities	Salary Start Finish Reason for leaving
<b>Name of Employer</b>	Telephone
Address	Employed (MO/YEAR) From To
Supervisor's Name	May we contact? <b>YES</b> <b>NO</b>
Responsibilities	Salary Start Finish Reason for leaving
<b>Name of Employer</b>	Telephone
Address	Employed (MO/YEAR) From To
Supervisor's Name	May we contact? <b>YES</b> <b>NO</b>
Responsibilities	Salary Start Finish Reason for leaving
<b>Name of Employer</b>	Telephone
Address	Employed (MO/YEAR) From To
Supervisor's Name	May we contact? <b>YES</b> <b>NO</b>
Responsibilities	Salary Start Finish Reason for leaving

Have you ever been disciplined or discharged for misconduct or unsatisfactory service or forced to resign from any position? If so, state date, name and address of employer and reason for discharge or forced resignation in each case \_\_\_\_\_

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**CERTIFICATION AND ATTESTATION OF APPLICANT**

**[PLEASE READ CAREFULLY]**

I understand that by completing and submitting this application for consideration for employment at Alois Roofing and Sheet Metal (Company), Alois Roofing and Sheet Metal has no obligation to hire me for employment. I also understand, if I become employed at Alois Roofing and Sheet Metal, my employment will be on an at-will basis which I understand to mean that Alois Roofing and Sheet Metal or I can terminate my employment at any time, for any reason, with or without cause, with or without prior notice. I further understand that no representative of Alois Roofing and Sheet Metal has the authority to make any assurances to the contrary and I understand that I will not be guaranteed employment for any indefinite duration.

By my signature below, I authorize the Company to contact references provided for employment reference checks and to verify the information contained in this application. I hereby release Alois Roofing and Sheet Metal from any and all liability of whatever kind and nature which could result from obtaining and basing any employment decision on such information.

I attest by my signature below that I have provided Alois Roofing and Sheet Metal with truthful, accurate and complete information on this application. I also attest that I have not concealed or omitted any information requested, and I attest I have not falsified statements of any kind in the application process or omitted or provided misleading information. I understand that if any information I have provided in this application is false or untrue, or if I have concealed or omitted any information requested, this will result in my denial of employment or immediate dismissal if I become employed by Alois Roofing and Sheet Metal

Signature of Applicant: \_\_\_\_\_

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

**APPLICANT CONSENT FORM FOR DRUG TESTING**

**[PLEASE READ CAREFULLY]**

I, \_\_\_\_\_ [Applicant Name], do hereby agree to submit to testing to be conducted by \_\_\_\_\_ [Laboratory Name/Address] for the detection of drugs. I give my permission for test results to be provided to Alois Roofing and Sheet Metal

I understand that positive test results, the refusal to be tested, or any attempt to affect the test results or test sample will result in the withdrawal of my application for employment, withdrawal of any conditional employment offer I may have received from Alois Roofing and Sheet Metal or the termination of my employment, depending on when the results are received.

Signature of Applicant: \_\_\_\_\_

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

Witnessed By: \_\_\_\_\_

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