James A. Quaglino, Inc.

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer. At-Will Employer

Acceptance of this application does not imply or indicate that the applicant will be hired.

Resumes will not be accepted in place of a completed application. However, resumes may be attached to this application.

PERSONAL IN	FORMATION					,			**		
Last Name	Middle				e		Date of Application				
Address				State		Zip		Email Address			
Home Phone Number			Cell Phone Number					Other Phone Number			
How were you referred to the company?			Position(s) Applying For					Temporary / Part-Time / Full Time			
Days and hours availab	le for work:	Mon	Tues	Wed	Thurs	Friday	Sat	Sat Sun Date you can start			
Available to work overtime? () Y () N	Are you 18 or older?	Salary o	desired		I	l		Ever appl	lied to / worked for Company before?		
Friends, relatives, acquaintances working for Company? () Y () N		If yes, state name & relationship:						If hired, do you have transportation to/from work? ()Y()N			
If your position require	s that you drive for the Co	mpany, y	ou must h	nave a Driv	ver's Licen	se in good	d stan	nding. If n	o, explain.		
Class A License (3 Axles & Towing) () Y () N			Class B License (3 Axle Truck) () Y () N					Class C License (2 Axle) () Y () N			
If hired, can you presen	t evidence of your US citiz	enship o	proof or	your legal	right to w	ork in the	Unit	ted States	?()Y()N		
Are you able to perform the essential functions of twithout reasonable accommodations? () Y () N								If no, describe essential functions that cannot be performed:			
Do you speak, write or	understand a language in	addition t	to English	n? () Y ()) N If yes,	please pr	rovide	e details.			
Please indicate your exp	perience and skills with the	e followir	ng: PC/La	ptop, Typi	ing, MS W	indows, I	ntern	et, MS Of	fice, etc		
	experience, training qualif n us??()Y()N If yes, p				l should b	e brought	to ou	ır attentio	n, in the case that they make you		
Have you ever been dis	charged or asked to resign	from em	ployment	?()Y()	N If yes,	please pro	ovide	details.			
EDUCATION											
Type of School	Name and City & State	where Lo	cated		Numbe Comple	r of Years eted		d you aduate?	Subjects Studied and/or Diploma Received		
High School							8-1				
Junior College/Trade School											
College/University											
Graduate School											

EMPLOYMENT HISTORY List below your last four employers, starting with your most recent position. Include any military service assignments. Explain all gaps in employment history.								
Length of employment (include Day, Month, Year)	Name and Address and Phone	e Number of Employer	Position & Supervisor	Reason fo	r Leaving			
From								
То								
From								
То								
From								
То								
From								
То								
REFERENCES Please include		ot related to you).						
Name	Address/Phone		Position		Years Acquainted			
ADDITIONAL INFORMATION Please present any additional information you feel may be helpful to us in considering your application.								
ROOFING APPLICANTS	Complete this section							
How many years have you worked in	roofing? Check iter	ns below that apply to you	ır work history.					
JOB TYPE	,	ING TO √NO ARN EXPERIEN	√SOME ICE EXPERIEN		√VERY EXPERIENCED			
Kettle Man	LE.	AKN EXPERIEN	CE EXPERIEN		EXPERIENCED			
Built Up Roofing								
Torch Applied Roofing								
Composition Shingles Hand Nailed Comp. Shingles				_				
Clay & Cement Tile				-				
Single Ply Roofing								
Below Grade Waterproofing								
Standing Seam Metal Seamless Aluminum Gutters								
Roof Maintenance/Leak Repair								
Crew Foreman								

BUILDING OPERATIONS/LANDCAPING APPLICANTS Complete this section							
How many years have you worked in building operations/landsca	ping?	Check items below that apply to your work history.					
JOB TYPE √WI	LLING TO	√NO		√SOME	√VERY		
	LEARN	EXPERIEN	ICE EX	PERIENC	E EXPERIENCED		
Electrical Repair							
Plumbing Repair							
Painting							
Flooring repair/installation							
Landscape installation/maintenance							
Irrigation installation/repair							
Carpentry							
Tree trimming/pruning							
Drywall repair							
Roof Maintenance/Leak Repair							
Spanish Communication Skills							
AUTHORIZATION: I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I							
understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby							
authorized to make any investigations of my prior educational and employment history. I acknowledge that James A. Quaglino, Inc. is committed to							
maintaining a drug free workplace. This commitment may entail a pre-employment, post-offer drug test and any necessary procedures during the term							
of employment to enforce this policy. I understand that employment at this company is "at will," which means that either I or this company can							
terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment will							
continue on that basis. I understand that no supervisor, manager, or executive of this company, other than the president has the authority to alter the							
foregoing.							
Signature	Date	e					

This application will remain in our "active" file for 3 months, after which a new one must be submitted.