

FormanFord

Glass and Glazing Contractors

Forman Ford Glass and Glazing Contractors EMPLOYMENT APPLICATION

Equal access to programs, services, and employment is available to all persons. Applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. We are an equal opportunity employer and do not discriminate in any aspect of employment on the basis of race, color, religion, gender, age, national origin, disability, citizenship status, veteran status, or any other legally protected status in accordance with the requirements of federal, state, and local law.

FOR MANAGERS USE ONLY	
Hiring Company:	
Starting Date:	
Starting Wage:	
Position:	
Previously Held By:	
Location:	
<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time

Date:

PERSONAL	NAME LAST		FIRST			MIDDLE	
	ADDRESS NO. & STREET			CITY	STATE	ZIP CODE	AREA CODE/TELEPHONE NO.
	PREVIOUS ADDRESS: NO. & STREET		CITY			STATE	ZIP CODE
	ARE YOU AT LEAST 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHO REFERRED YOU TO THIS COMPANY?			ARE YOU WILLING TO WORK OVERTIME? <input type="checkbox"/> YES <input type="checkbox"/> NO		
	EMERGENCY NOTIFICATION (List name of person to be notified in case of emergency)						
Name (Last, First, Middle)		Address (Street, City, State, Zip)			Area Code/Telephone No.		

PREFERENCES	POSITION(S) APPLIED FOR		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time
	MAY WE CONTACT YOUR PRESENT EMPLOYER BEFORE YOUR EMPLOYMENT ENDS? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE AVAILABLE FOR WORK	SALARY DESIRED

EDUCATION						Circle Last Year Completed			
	SENIOR HIGH SCHOOL	LOCATION	Diploma <input type="checkbox"/> YES <input type="checkbox"/> NO	GPA	9	10	11	12	
	COLLEGE	LOCATION	Type of Degree	Major	GPA	1	2	3	4
	COLLEGE	LOCATION	Type of Degree	Major	GPA	1	2	3	4
	OTHER	LOCATION	Type of Degree - Certificate		GPA	No. of Mos.			
	EXTRA-CURRICULAR ACTIVITIES AND OFFICES HELD								
	PROFESSIONAL AFFILIATIONS				PROFESSIONAL CERTIFICATIONS OR DESIGNATIONS				
CAPABLE OF OPERATING: <input type="checkbox"/> Forklift <input type="checkbox"/> Calculator <input type="checkbox"/> Personal Computer <input type="checkbox"/> Power Tools <input type="checkbox"/> Multi-Line Phone System <input type="checkbox"/> Other:									

GENERAL	HAVE YOU SERVED IN THE ARMED FORCES? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A RESERVE OR GUARD MEMBER? <input type="checkbox"/> YES <input type="checkbox"/> NO	YOUR RESERVE OR GUARD STATUS <input type="checkbox"/> Active <input type="checkbox"/> Standby
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List below all present and past employment, beginning with your most recent
(Include address and area code with phone numbers)

PREVIOUS EMPLOYMENT	1	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor	
		Mo	Yr	Mo	Yr								
									\$				
									Per				
		(Area Code)	Telephone										
	2	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor	
		Mo	Yr	Mo	Yr								
									\$				
									Per				
		(Area Code)	Telephone										
	3	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor	
		Mo	Yr	Mo	Yr								
									\$				
									Per				
		(Area Code)	Telephone										
	4	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor	
		Mo	Yr	Mo	Yr								
									\$				
									Per				
		(Area Code)	Telephone										
5	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor		
	Mo	Yr	Mo	Yr									
								\$					
								Per					
	(Area Code)	Telephone											
6	Name and Address of Company and Type of Business		From		To		Describe the work you did	Starting Salary	Last Salary	Reason for Leaving	Name of Supervisor		
	Mo	Yr	Mo	Yr									
								\$					
								Per					
	(Area Code)	Telephone											

APPLICANT'S STATEMENT

By signing below, I certify that the answers and information set out above are true, accurate and complete to the best of my knowledge. I acknowledge that if any answer or information is not true, accurate or complete, I may not be hired, or if hired, I may be discharged. I authorize the Company to investigate all statements contained in this application for employment and to investigate my character and qualifications. I authorize my prior employers, references, and others with information regarding my work or educational history or my character, to provide the Company with all requested information and references, and to cooperate fully with the investigation of my character and qualifications. I give permission to all current or previous employers and/or managers to discuss my personal and employment history with the Company, consent to the release of such information, and release them from all liability and all claims based upon any statements or information they provide.

I understand that this application is not a contract of employment. I also acknowledge that no oral representations have been made, and that no one within the Company has the authority to make oral contracts of employment. If hired, my employment relationship with the Company is terminable at will, with or without cause, by either myself or the Company except as provided by Montana law.

I also understand that any offer of employment may be conditional upon my passing a post-offer physical examination or my ability to perform the essential job functions, with or without accommodation, and drug-alcohol test administered by a health care professional selected by Company, to which I hereby consent.

I understand and agree to all of the conditions and statements set forth above, and throughout this application.

Date

Signature of Applicant

Printed Name

AGREEMENT

NOTIFICATION OF PROCUREMENT OF CONSUMER REPORT

Through this document, FORMAN FORD GLASS AND GLAZING CONTRACTORS ("Company") is putting you on notice and disclosing to you that Company may obtain a consumer report for employment purposes as part of its pre-employment background investigation. In addition, such a consumer report may be obtained at any time during your employment.

BACKGROUND CHECK AUTHORIZATION

I, the undersigned consumer, do hereby authorize Company, by and through its independent contractor, to procure a consumer report on me.

This above-mentioned report may include, but is not limited to, employment and education verifications; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record; and, any other information bearing on my credit standing, credit capacity, and/or credit worthiness.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Company, including, but not limited to, any courthouse, any public agency, any and all law enforcement agencies and any and all credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I understand that this authorization shall remain on file and shall serve as an ongoing authorization for Company to obtain consumer reports at any time during my employment, for employment purposes.

I hereby release Company and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, of whatever kind, to me, my heirs or others making such claim or demand on my behalf, for procuring, selling, providing, brokering and/or assisting with the compilation or preparation of the consumer report hereby authorized.

PRINTED NAME:		FIRST	MIDDLE	LAST	
SIGNATURE:			DATE:		
COMPLETE RESIDENCE ADDRESS:	STREET NUMBER/PO BOX		STREET NAME		
	CITY		STATE	ZIP CODE	COUNTY
SOCIAL SECURITY NUMBER:					
DAYTIME TELEPHONE NUMBER:					
DRIVER'S LICENSE NUMBER:				STATE OF ISSUANCE:	
DATE OF BIRTH*:					
<small>* This information will be used only for proper identification purposes during the course of our background search as well as in the event we find adverse information during the course of our background search. We comply with the Age Discrimination in Employment Act. Therefore, this information will not be used to discriminate on the basis of age.</small>					

Para-informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

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.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **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, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit 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.ftc.gov/credit 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 ten 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.ftc.gov/credit.
- **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.ftc.gov/credit.

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. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA, Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management, Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051