



FELDKAMP ENTERPRISES INC. APPLICATION FOR EMPLOYMENT

Revised: 02/10/2021

It is the policy of Feldkamp Enterprises Inc. (the "Company"), to comply with all applicable state and federal laws prohibiting discrimination in employment. We consider applicants for employment based on job-related qualifications, without regard to their age, race, color, religion, sex, sexual orientation, gender identity, national origin, disability, veteran status, union affiliation, or any other protected characteristics.

Applicants will be tested for illegal drugs and alcohol and must pass a background check to the Company's satisfaction before an offer of employment becomes final.

Please review all instructions provided below carefully before filling out this Application. Failure to follow the instructions will result in exclusion of your Application.

Your Application will be kept on file for 60 days. If you wish to be considered for employment after 60 days from the date you submit your Application, you must call (513)347-4500.

Position(s) for which you are applying (check all that apply):

Journeyman _____ Apprentice _____ General Laborer _____ Office _____ Other (Trade) _____

PERSONAL DATA

Name _____

Phone: _____ Email _____

Home Address _____

City/State/Zip _____

GENERAL INFORMATION

1. Are you available to work any Days/Hours needed? Yes No

If you selected No, please indicate your availability to work specific days/hours below:

Monday:	<input type="checkbox"/> Yes (from ____ to ____)	Friday:	<input type="checkbox"/> Yes (from ____ to ____)
Tuesday:	<input type="checkbox"/> Yes (from ____ to ____)	Saturday:	<input type="checkbox"/> Yes (from ____ to ____)
Wednesday:	<input type="checkbox"/> Yes (from ____ to ____)	Sunday:	<input type="checkbox"/> Yes (from ____ to ____)
Thursday:	<input type="checkbox"/> Yes (from ____ to ____)		

2. Minimum hourly rate you require: \$ _____/hour

- 3. Would you accept full-time work? Yes No
- 4. Would you accept part-time work? Yes No
- 5. Do you have another full-time job that you would continue to work if we hired you? Yes No
- 6. Do you have any licenses, certifications, or training that would be relevant to the job(s) for which you are applying? Yes No If yes, please explain:

- 7. Do you have any experience from military service that would be relevant to the job(s) for which you are applying? Yes No If yes, please explain:

- 8. Have you ever been employed by the Company before? Yes No
If yes, please give approximate dates: _____

- 9. Can you lawfully work in the U.S.? Yes No (If yes, proof is required)

- 10. Are you at least 18 years of age? Yes No (If yes, proof is required)

- 11. Within the past seven (7) years, have you been convicted of a felony, or released from prison?

Yes No (Note: Answering yes does not automatically disqualify you from employment, as the nature of the offense, date, and job for which you are applying will be considered.)

If yes, please explain:

(If more space is required, please attach additional pages.)

- 12. If you are applying for a position that would require you to drive a company vehicle or a personal vehicle during work hours:

Do you have a valid driver's license? Yes No

Have you ever had a driver's license suspended? Yes No If yes, please explain:

Please list any and all traffic and moving violations, other than parking tickets, in the past five years:

(If more space is required, please attach additional pages.)

PREVIOUS EMPLOYERS

Please list all of the previous employers for whom you have worked over the last ten (10) years. List your most recent employer first. Please include both construction and non-construction work.

May we contact your most recent employer? Yes No

1. Company Name: _____ Employed from: _____ to _____
 Address: _____ Phone: _____
 Duties of Position: _____
 Name of Supervisor: _____ Reason for Leaving: _____

2. Company Name: _____ Employed from: _____ to _____
 Address: _____ Phone: _____
 Duties of Position: _____
 Name of Supervisor: _____ Reason for Leaving: _____

3. Company Name: _____ Employed from: _____ to _____
 Address: _____ Phone: _____
 Duties of Position: _____
 Name of Supervisor: _____ Reason for Leaving: _____

4. Company Name: _____ Employed from: _____ to _____
 Address: _____ Phone: _____
 Duties of Position: _____
 Name of Supervisor: _____ Reason for Leaving: _____

(If more space is required, please attach additional pages.)

REFERENCES

1. Please provide at least three (3) employment references who are not related to you:

Name:	Contact Information:
_____	_____
_____	_____
_____	_____

2. Have you ever worked with or for any employee or employees of this company who would be willing to give you a good reference? Yes No If so, who?

Name: _____ Position: _____

REPRESENTATIONS AND WAIVER

PLEASE READ CAREFULLY, INITIAL EACH PARARAPH AND SIGN BOTTOM OF THE PAGE

In exchange for the consideration of my job application by Feldkamp Enterprises, Inc. (Hereinafter called "the Company"), I understand and agree as follows:

_____ In the event I accept an offer of employment from the Company, my employment will be considered "at-will" which means that both I and the Company remain free to end the employment relationship at any time, with or without notice, for good cause or no cause.

_____ I further understand that if I am hired, my employment with the Company shall be probationary for a period of ninety (90) days, however the successful completion of the probationary period will not alter or modify the "at-will" nature of my employment with the Company.

_____ No oral or written representations, including, but not limited to, statements in this Application for Employment or anything in the employee handbooks, personnel manuals, benefit plans, policy statements, or other written documents, as they may exist from time to time, shall serve to create an actual or implied contract of employment, confer any right to remain an employee of the Company, or otherwise to change in any respect the "at-will" nature of my employment. My at-will employment relationship cannot be altered except by a specific statement to that effect, in writing, and signed by the Owner or President of the Company.

_____ I understand that if I am hired, then during my employment the Company may, with or without notice, unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

_____ I understand that the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing during employment, and my consent to and compliance with this policy is a condition of any offer of employment, and any continued employment thereafter.

_____ I understand that an offer of employment may be conditional upon my ability to pass a job-related pre-employment physical exam. I agree to provide all medical history information, and sign all authorizations, necessary for the examiner to determine my ability to pass the pre-employment physical. I understand that all medical information gathered during this process will be treated confidentially, and will not become part of my personnel file with the Company.

_____ I represent that the information I have provided on this application, as well as any statements and representations I make to the Company during the hiring process, are true, accurate and complete. I understand that my misrepresentation or omission of information requested on this application or otherwise during the hiring process is cause for rejection of my application, withdrawal of any offer of employment, and if employment has commenced, my immediate dismissal. I agree that neither the Company nor any of its subsidiaries, affiliates, employees, agents, officers or directors shall be liable in any respect if my application for employment is rejected or my employment is terminated because of the falsity of statements, answers, or omissions made by me on this application or otherwise during the hiring process.

_____ I authorize the verification of all information, statements and representations I make during the hiring process. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability because of such contact. I agree that neither the Company nor any of its subsidiaries, affiliates, employees, agents, officers or directors shall be liable in any respect if my application for employment is rejected or my employment is terminated because of the misrepresentations or omissions made by others about me, which are relied upon by the Company in good faith, during the hiring process.

_____ I understand that in connection with the processing of my employment application, the Company may wish to request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics and mode of living. I understand and agree that if the Company wishes to obtain such information, I will be required to complete and sign an Authorization for Background Checks form in advance of such request. I will be provided with, and have the opportunity to review,

the official government notice entitled: "A Summary of Your Rights Under the Fair Credit Reporting Act" before completing and signing the Authorization for Background Checks form.

Signature of Applicant: _____ Date: _____

Thank you for completing this application form and for your interest in our business.