

3280 General William W. Drive Florence, SC 29506 Bus (843) 413-4300 Fax (843) 413-4376 www.worthgintoncabs.com EOE/AA/M/F/D/V

Application for Employment

EEO Policy

Worthington Industries maintains a policy of non-discrimination for all employees and applicants in every facet of the company's operation. In compliance with federal and state laws, Worthington Industries hires, trains and promotes qualified applicants and employees without unlawful discrimination on the basis of race, ethnicity, color, gender, gender identification, pregnancy, age, religion, creed, military status, national origin, veteran's status, disability, genetic information or any other classification protected under federal, state or local law.

PLEASE NOTE: Answer each question fully and accurately. No action can be taken on this application until all questions are answered. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

This application will remain active for ninety (90) days from the date of the application. Consideration for employment after ninety (90) days requires a new application.

PLEASE PRINT

Open Position Applied For (Please list the open p cannot be considered — listing "any", "all", etc is not acc material handler, welder, etc. Please ask for a list of cur application.)	eptable – the specific job must	be designated such as	s
How Did You Learn About Us? (Please s	pecify source)		
Referred by current employee (please list		Walk-In	
□ Job Fair		Advertisen	nent
 Friend/Relative Employment Agency/Recruiter 		Newspape	er □ Radio
Employment Agency/Recruiter		Website	🗆 Radio
South Carolina Department of Labor		Other	
NAME Last ADDRESS	First		Middle
Number Street	City	State	Zip
Home Telephone Number (Area Code)	Cell Phone Number	(Area Code)	Social Security Number (Optional)
Email Address (Optional)			<u> </u>
Have you ever filed an application with us be	efore?	lf ve	□Yes □ No

	If yes, give date		
Have you ever been employed with us before?	If yes, give date	□Yes	□ No
Are you over 18 years of age?		□Yes	□ No
Are you legally eligible for employment in the United States? Proof of citizenship or immigration status will be required upon employment.		□Yes	□ No
On what date would you be available for work?	Date		

DESIGNERS AND MANUFACTURERS OF QUALITY ROPS, CABS AND CUSTOM STEEL FABRICATIONS HR130C, 2.28.2012 A-P Flo

Are you available to work: (check all that apply)	Full-Time	Part-Tin	ne □T	emporary
Are you available to work: (check all that apply)	□ 1 st Shift	□ 2 nd Shift	□ 3rd Shift	□ Weekend

Have you ever been convicted of a felony in the last ten (10) years? If yes, please provide details \Box Yes \Box No

(A "yes" answer does not automatically disqualify you from employment since the nature of the offense, date, rehabilitation and the job for which you are applying is also considered)

Education

School	Name & Location	Course of Study	Number of Years Completed	Degree or Diploma Received
High School				
Technical School				
College or Graduate School				
Other Education or Training				

Professional License or Membership:

License Number: _____ Expiration Date: __

(You need not disclose membership in professional organizations that may reveal information regarding race, ethnicity, color, religion, gender, national origin, disability, sexual orientation, genetic information or other protected status)

Employment Experience

Start with your present or last job. Include military service and account for any periods of unemployment. You may exclude organizations which indicate race, ethnicity, color, religion, creed, gender, gender identification, national origin, disability, sexual orientation, genetic information or any other classification protected under federal, state or local law.

Employer		Dates	Employed	
		From	То	Work Performed
Address				
Telephone Number		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Employment Experience (Cont.)

Employer		Dates	Employed	
		From	То	Work Performed
Address				
Telephone Number		Hourly Rate/Salary	,	-
	1	Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates	Employed	
Employer				Morile Deufernesed
Address		From	То	Work Performed
Address				
Telephone Number		Hourly Rate/Salary	,	
		Starting	Final	
Job Title	Supervisor	Starting	Filidi	
Reason for Leaving				
How many jobs other than thos	e listed above have you had in	the last 5 years?		
Are you currently employed? If yes, whom do you suggest we			□Yes □ No	
in yes, whom do you suggest w	- contact ?			••••••••••••••••
May we contact your past empl	lay we contact your past employers for references?			□Yes □ No
If no, please explain:				

Have you worked or attended school under any other name? If yes, give names: _____

Special Skills and Qualifications

Summarize any skills, additional training and qualifications. State any additional information you feel may be helpful to us in considering your application:

□Yes

🗆 No

What machines or equipment can you operate that are related to the job for which you are applying?

Applicant's Certification and Agreement:

I certify that all information I have supplied in this application and in any other form, oral or written, is true, complete, and accurate. I understand that any misrepresentation, omissions of facts, or incomplete answers in any application document, or any other form, oral or written, will disqualify me from further consideration of employment. I further understand that, if employed, any misrepresentations or omissions of facts in any applicant form, oral or written; will be cause for my dismissal at any time, without prior notice.

I understand, if employed, my employment with Worthington Industries is not for a specific term and may be terminated by me or Worthington Industries with or without notice or cause at any time. I further understand that no oral promise, employer policy, custom, business practice, or other procedure (including the Employee Handbook) or any other personnel manual, constitutes an employment contract or modification of the at-will employment relationship between me and Worthington Industries.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests, take a driver's examination, submit to a background investigation, or take a preemployment drug test. If I am offered employment to start work before any required test is complete, my employment is contingent on a satisfactory result on all required tests.

I authorize Worthington Industries to contact my prior employers, and other sources of information regarding my background, and I hereby authorize and direct each such employer and source of information to answer any and all questions regarding my prior employment background, and I hereby authorize and direct each such employer and source of information to answer any and all questions regarding my prior employment and background. I hereby indemnify Worthington Industries, each of my prior employers, and each of the other sources of information contacted and agree to hold harmless from any claims arising from this authorization and direction.

I understand that Worthington Industries maintains a drug-free workplace and agree that maintenance of same is essential to the safety of the workplace and employees. I promise to abide by Worthington Industries's policies prohibiting the use or possession of drugs, alcohol, or any controlled substance, or the misuse of prescribed or over-the-counter medicine on company premises or while on duty. I also understand that I may be tested for drugs, alcohol or controlled substances if I am employed by Worthington Industries.

I understand that I must meet the employability requirement of the U.S. Citizenship & Immigration Service and submit appropriate documents to satisfy the requirements for completing DHS Form I-9.

I understand and agree that work schedules and requirements vary and can be unpredictable, and that, while Worthington Industries will make reasonable efforts to accommodate work schedules and employee availability, I may be required to work overtime, weekends, different shifts, or other agreements. I consent to these requirements as necessary and legitimate conditions of employment.

I understand that this application will be considered active for ninety (90) days from this date. If I have not heard from Worthington Industries at the conclusion of the ninety (90) day period, it is my responsibility to complete a new application if I wish to be considered for employment.

I have read and understand everything on this application. I further understand that my signature is required in order for this application to be considered.

Applicant's Signature		Date	
Arrange Interview	FOR PERSONNE	EL DEPARTMENT USE ONLY	
Remarks:			
		Interviewer	Date
Employed	🗌 Yes 🗌 No	Date of Employment	
Job Title	Hourly Rate/Sala	ary Department	
By Name & Title		Date	



Worthington Industries - Florence Voluntary Self-Identification (Confidential – For Statistical Use Only)

We are an Equal Opportunity Employer and do not discriminate on the basis of race, religion, color, national origin, ancestry, gender, gender identification, disability, pregnancy, age, military status, veteran status, genetic information or any other classification protected by federal, state or local law.

As required by law, we must record certain information to be made a part of our Affirmative Action Program. The information below will be kept separate from the application and used only for the necessary information for Affirmative Action reporting.

Completion of this data is voluntary and will not affect your opportunity for employment, or terms or conditions of employment, if hired.

Please return this page with your application. We appreciate your cooperation.

A written copy of this Affirmative Action Program is available for inspection by any employee, or applicant for employment, during normal business hours, in the Human Resources Department. Interested persons should contact the Affirmative Action Officer at 843.413.4345 for assistance.

Date Pos	sition Applied for	
Name		
Last	First	Middle
Please identify where you le organization:	earned about an employment opportun	ity with this
 Employee Referral Walk-In Job Fair Advertisement Friend/Relative Newspaper 	☐ Website ☐ Radio	t Agency/Recruiter ina Department of

AFFIRMATIVE ACTION SURVEY

Government agencies require periodic reports on the race, ethnicity and gender of applicants. This data is for analysis and affirmative action only. Submission of information is voluntary.

GENDER

Check one:	Male	Female
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RACE/ETHNIC GROUP

Please check one of the descriptions below corresponding to the race/ ethnic group with which you most identify:

Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands.

American Indian or Alaska Native (Not Hispanic or Latino) – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

	Two or More Races (Not Hispanic or Latin	o) – All persons	s who identif	y with more than
one	of the above five races.			

FOR HUMAN RESOURCES DEPARTMENT USE ONLY

Position(s) Considered For: _____Date: ____D