

APPLICATION FOR EMPLOYMENT

(Please Print Legibly in Ink)

Charlotte Pipe and Foundry Company

P. O. BOX 35430
CHARLOTTE, NORTH CAROLINA 28235

PERSONAL INFORMATION

Date of Application: _____

Name _____ Email Address _____
Last First Middle Initial

Home Address _____
No. Street City State Zip

How many years have you lived at this address? _____

Daytime Phone No. _____ Evening Phone No. _____ Cell Phone No. _____

Position(s) applied for 1. _____ Rate of pay expected \$ _____ per _____
2. _____ Rate of pay expected \$ _____ per _____

Are you at least 18 years of age? _____

How did you learn of this opening? _____

Shift Preference 1st 2nd 3rd

Are you willing to work any shift, including nights and weekends? Yes No

If no, please state limitations: _____

Have you worked for us before? _____ If yes, when? _____

List any friends or relatives working for us _____

If hired, on what date will you be available for work? _____

What experiences, skills, or qualifications do you have which you feel would especially qualify you for work with the company?

Do you have a reliable means of transportation to get to work? _____

Have you ever been convicted of a crime, including misdemeanors? Yes No

Note: Do not include adjudications. Do not include convictions that were sealed, eradicated or expunged, or convictions that resulted in a referral to a diversion program. Conviction of a crime will not necessarily disqualify you from employment. It will be considered only as it may relate to the job you are seeking. Factors such as the age and time of the offense, seriousness and nature of the violation, and rehabilitation will be considered when making any employment decisions. If your answer is "yes", please explain the circumstances surrounding such offense, including place, date, name of court, etc.

Charlotte Pipe and Foundry Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to any legally protected status such as race, color, religion, gender, national origin, citizenship, age, disability or veteran Status. We assure you that your opportunity for employment with this company depends solely on your qualifications.

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME AND ADDRESS	How Many Years Attended?	Graduated	COURSE OR MAJOR
HIGH SCHOOL/ G.E.D.			<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
POST GRADUATE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
BUSINESS OR TRADE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER			<input type="checkbox"/> Yes <input type="checkbox"/> No	

MILITARY SERVICE RECORD

Have you ever served in the armed forces? Yes No

Length of Service _____ (Years/Months) Rank at discharge _____

What were your duties in the Service (include special training and duty station)?

ADDITIONAL INFORMATION

Please use the space below to summarize any additional information necessary to describe your full qualifications.

PERSONAL AND PROFESSIONAL REFERENCES

(Excluding Former Employers and Relatives)

Name	Occupation	Contact Information
1. _____	_____	
2. _____	_____	
3. _____	_____	

DATES		NAME, ADDRESS, PHONE # OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

PRIOR WORK HISTORY

(PLEASE LIST IN ORDER, STARTING WITH PRESENT EMPLOYER FIRST)

Describe in detail the work you did. _____

DATES		NAME, ADDRESS, PHONE # OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

Describe in detail the work you did. _____

DATES		NAME, ADDRESS, PHONE # OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

Describe in detail the work you did. _____

DATES		NAME, ADDRESS, PHONE # OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

Describe in detail the work you did. _____

DATES		NAME, ADDRESS, PHONE # OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		

Describe in detail the work you did. _____

MAY WE CONTACT YOUR PRESENT EMPLOYER Yes No

If there are compelling reasons why we should not contact any of your employers, you may note those reasons on the lines below or discuss them with the interviewer. However, Charlotte Pipe may contact prior employers who it believes may have relevant

information about your qualifications.

APPLICANT'S CERTIFICATION AND CONSENT

Charlotte Pipe and Foundry Company conducts its business with the highest possible degree of safety; I, therefore, agree to submit to pre-employment drug testing, post-conditional job offer physical examination, and such future examinations as may be required by the Company. I am aware that the Company has a drug and alcohol policy and that consideration for employment and continued employment is based on consent to and compliance with such policy.

I hereby certify that I am a bona fide applicant and the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements, misleading information, or omissions on the application shall be considered sufficient cause for dismissal regardless of when this information may be brought to the employer's attention. You are hereby authorized to make any investigation of my personal history and employment history to determine facts that may be relevant to my qualifications for work with Charlotte Pipe and Foundry Company. I authorize the release of information to Charlotte Pipe and Foundry Company, its representatives and/or agents from: past employers, personal references, developed references, other persons, companies, corporations, residential management agents, and any schools I have attended. In authorizing this investigation, I hereby release the company, their associates, representatives and/or agents, and any persons or institutions so contacted, of any liability as a result of the giving of such information. I also fully understand that this application is not intended to be construed as a contract of employment. I also understand that, if hired, my employment will be something that either I or the Company can end at any time and for any reason.

Note: The provisions of the Fair Credit Reporting Act may be applicable if a credit report is obtained and considered.

Signature of Applicant _____

Date _____

“THIS APPLICATION IS INACTIVE AFTER 30 DAYS”

DO NOT WRITE BELOW THIS LINE

INTERVIEW YES NO Date _____ Hour _____

Starting Rate _____ Starting Date _____ Shift _____

Occupation _____ Dept. _____ Clock No. _____

Interviewed by _____ Hired by _____ Approved by _____

