



APPLICATION FOR EMPLOYMENT

106 Delaware Street – Lexington, Ohio 44904

Phone: 419.884.2261 Fax: 801.607.8710

OFFICE USE ONLY	HIRE DATE
INTERVIEW DATE/TIME	INTERVIEWED BY
EMPLOYEE #	POSITION
STARTING CREW LOCATION	WAGE

PERSONAL INFORMATION

We are an equal opportunity employer and the information being requested in this application shall not be used for any discriminatory purpose with respect to hire, tenure, conditions, or privileges of employment as prohibited by applicable local, state, or federal law. Discrimination on the basis of a handicap, which does not create an occupational hazard nor prevent substantial job performance, is prohibited by Ohio law. We are a drug-free work place.

THIS APPLICATION BECOMES VOID AFTER 120 DAYS UNLESS RENEWED.

POSITION (Job Title)	DATE	
NAME (Last, First, and Middle Initial)	SOCIAL SECURITY NUMBER	
ADDRESS (Street, City, State and Zip)		
HOME TELEPHONE	CELL PHONE / FAX NUMBER	EMAIL ADDRESS
U.S. CITIZEN Yes No	DATE AVAILABLE	Can you travel? Yes No Overnight stays? Yes No
Do you have a valid driver's license? Yes No Class A CDL? Yes No Can you do heavy lifting? (75lbs) Yes No		
Can you work long hours? Yes No		
Have you been convicted for other than minor traffic violations? Yes No		
If yes, when?	Where?	Reason
List hobbies and activities		
SALARY DESIRED		
How did you learn of this position?		

EDUCATION AND TRAINING

• List high school, college, business school, military training, and other relevant education.

School Name and Location	# of years completed	Graduated Yes/No	Major	Degree Received Yes/No	
1					
2					
3					

EMPLOYMENT HISTORY (MOST RECENT FIRST)

• MAY WE CONTACT YOUR PRESENT/FORMER EMPLOYERS? YES NO

1. Present or Last Employer	Employer's Address	Employer's Phone Number	
Your Title	Months & Years Employed in this Position From / To /		Last Salary
Immediate Supervisor's Name	Reason for Leaving	DOT Regulated? YES / NO	

Specific Duties:

2.Name	Employer's Address	Employer's Phone Number
Your Title	Months & Years Employed in this Position From / To /	
Immediate Supervisor's Name	Reason for Leaving	DOT Regulated? YES / NO

Specific Duties:

3.Name	Employer's Address	Employer's Phone Number
Your Title	Months & Years Employed in this Position From / To /	
Immediate Supervisor's Name	Reason for Leaving	DOT Regulated ? YES / NO

Specific Duties:

List other job roles, duties & experience helpful for position applying for:

DATE AND SIGNATURE

PLEASE REMEMBER TO SIGN AND DATE THIS APPLICATION.

I hereby certify all answers and statements are true and complete and agree that any false information, or lack of pertinent information, may be grounds for immediate discharge if employed. The companies, schools and persons named above may give information regarding me and I hereby release them from all liability for doing so. Furthermore, I hereby certify that I understand that employment with BP Electric of Ohio, Inc. is considered "at-will", meaning that I may terminate my employment at any time for any reason, with or without notice or cause, and the Company has this same right. Accordingly, there is no specific length or duration of employment guaranteed.

Date: _____ Signature: _____

Disclosure and Authorization

[IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Employer (“the Company”) may obtain information about you from a consumer reporting agency for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may be obtained at anytime after receipt of your authorization and, if you are hired, throughout your employment. I understand that I have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by OPENonline, LLC, PO Box 549 Columbus, OH 43216 (888) 381-5656 or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing Employer to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired, throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” at any time after receipt of this authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by OPENonline LLC, another outside organization acting on behalf of Employer, and/or Employer itself. I agree that a facsimile (“fax”) or photographic copy of this Authorization shall be as valid as the original.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by Employer by contacting the consumer reporting agency identified above directly.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer credit report if one is obtained by the Company at no charge whenever you have the right to receive such a copy under California law.

Under Section 1786.16(a)(2)(B)(vi) of the CA Civil Code, you are notified that OPENonline LLC privacy practices can be found at www.openonline.com.

Under Section 1785.20.5 of the CA Civil Code and Section 1024.5 of the CA Labor Code, you are notified that a credit report may be ordered if you are applying for a position involving access to confidential or proprietary information.

Use of date of birth is for identification purposes only. The Company is an equal opportunity employer. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Name of Authorizing Consumer: _____

Social Security Number: _____ - _____ - _____

Date of Birth: _____ / _____ / _____ Driver's License _____

Signature of Authorizing Consumer: _____ Date: _____

The information in this form is not intended as legal advice. Legal advice should be sought from your attorney. OPENonline does not guarantee the completeness, sufficiency, or accuracy of the information contained in the form. It may be desirable to adapt the foregoing to fit your specific situation.