



Thank you for inquiring about employment with our company. Please complete the attached employment application and return with a current copy of your DMV record to:

Independent Concrete Cutting  
3411 Camino Del Sol  
Oxnard, CA 93030

License #543268  
3411 Camino Del Sol • Oxnard, CA 93030-8985  
(818) 785-8498 • (805) 988-0016 • (661) 274-0206

# APPLICATION FOR EMPLOYMENT



An Equal Opportunity Employer

## PERSONAL INFORMATION

NAME (LAST, FIRST)				
SOCIAL SECURITY NO.		DRIVERS LICENSE NO.		
PRESENT ADDRESS		APT. NO.	CITY	STATE ZIP
PERMANENT ADDRESS		APT. NO.	CITY	STATE ZIP
ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE		EMAIL	

## DESIRED EMPLOYMENT

POSITION		DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHERE?	WHEN?
EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO		WHERE?	WHEN?
REASON FOR LEAVING			
NAME OF LAST SUPERVISOR AT THIS COMPANY			
WHO REFERRED YOU TO THIS COMPANY? <input type="checkbox"/> EMPLOYMENT AGENCY <input type="checkbox"/> NEWSPAPER <input type="checkbox"/> FRIEND <input type="checkbox"/> INTERNET <input type="checkbox"/> WALK IN			

## EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK
SPECIAL TRAINING
SPECIAL SKILLS

NAME (LAST, FIRST) \_\_\_\_\_



### FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT FIRST

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
STARTING SALARY	FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME (LAST, FIRST) \_\_\_\_\_



## REFERENCES

BELOW, GIVE THE NAMES OF THREE PERSONS YOU ARE NOT RELATED TO, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

## SERVICE RECORD

BRANCH OF SERVICE	DISCHARGE DATE, RANK

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 5 YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YES, EXPLAIN (WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATIONS)

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATIONS OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOLLOWING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE

EEO: EEO-1 Voluntary Self Identification Form

The Equal Employment Opportunity Commission (EEOC) requires organizations with 100 or more employees to invite applicants to self-identify gender and race and complete an EEO-1 report each year. Completion of this data is voluntary and will not reflect your opportunity for employment, or terms or conditions of employment. This form will be used for EEO-1 reporting purposes only and will be kept separate from all other personnel records only accessed by the Human Resources department. Please return completed forms to the HR department.

NAME: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

GENDER: (Please check one of the options below)

- Male
- Female

**RACE/ETHNICITY**

(Please check one of the descriptions below corresponding to the ethnic group with which you 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, Thailand and Vietnam.

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 maintains tribal affiliation or community attachment.

Two or more races (Not Hispanic or Latino): All persons who identify with more than one of the above races.

Date completed: \_\_\_\_\_

Thank you for your participation

**NOTICE REGARDING INVESTIGATIVE CONSUMER REPORT  
PURSUANT TO CALIFORNIA LAW**

Independent Concrete Cutting, Inc ("the Company") intends to obtain information about you from an investigative consumer reporting agency for employment purposes. Thus, you can expect to be subject of "investigative consumer reports" for employment purposes. Such reports may include information about your character, general reputation, personal characteristics, and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to, obtaining information regarding your criminal record history and driving record history as well as verification of your references, work history, educational history, licenses, and other information about you. In collecting information for the reports, it may be necessary to interview people who are knowledgeable about you. The results of the reports obtained by the Company may be used as a factor when making employment decisions. The source of any investigative consumer report (as those terms are defined under California Law) will be Atlantic Personnel & Tenant Screening, Inc., 8895 N. Military Trail, #104E, Palm Beach Gardens, Florida 33410: (877) 744-2104; <https://www.keysecure.com/atlanticscreening.com/main.htm>.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California Law.

Under California Civil Code § 1786.22, you are entitled to find out from an ICRA what is in the ICRA'S file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You may also request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of information contained in the ICRA's file on you that is required to be provided by the California Civil Code will be provided to you viz telephone if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosure to third parties caused by mishandling of mail after such mailing leaves the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military Identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity.

The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who you must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.

**[IMPORTANT - PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION]**

**DISCLOSURE REGARDING BACKGROUND INVESTIGATION**

Independent Concrete Cutting, Inc. ("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 contain information regarding your criminal history, credit history, motor vehicle records ("driving records"), verification of your education or employment history or other background checks. you 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 Atlantic Personnel & Tenant Screening, Inc. 8895 N. Military Trail, #104E, Palm Beach Gardens, Florida 33410; (877) 747-2104; <https://www.keysecure.com/atlanticscreening.com/main.htm>, or another outside organization. Information regarding Atlantic Personnel & Tenant Screening, Inc.'s privacy practices (including information about whether any consumer personal information will be sent outside the U.S. or its territories) may be found at [www.atlanticscreening.com](http://www.atlanticscreening.com). The scope of this notice and authorization is all-encompassing, however, allowing Independent Concrete Cutting, Inc. to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. You should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

**ACKNOWLEDGMENT AND AUTHORIZATION**

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and 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" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. 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, insurance company, or other party to furnish any and all background information requested by Atlantic Personnel & Tenant Screening, Inc. 8895 N. Military Trail #104E, Palm Beach Gardens, Florida 33410; (877) 747-2104; <https://www.keysecure.com/atlanticscreening.com/main/htm>, another outside organization acting on behalf of Independent Concrete Cutting, Inc. and/or Independent Concrete Cutting, Inc. itself. I agree that a facsimile ("fax") or electronic or photographic copy of this Authorization shall be as valid as the original.

<b>Maine applicants or employees only:</b> You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly.
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<b>State of Washington applicants or employees only:</b> You have the right to receive a complete and accurate disclosure of the nature and scope of any investigative consumer report as well as a written summary of your rights and remedies under Washington law.
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<b>New York applicants or employees only:</b> You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law.
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<b>Minnesota and Oklahoma applicants or employees only:</b> Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company. <input type="checkbox"/>
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<b>California applicants or employees only:</b> By signing below, you also acknowledge receipt of the NOTICE REGARDING INVESTIGATIVE CONSUMER REPORT PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law. <input type="checkbox"/>
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Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Maiden Name (If applicable) \_\_\_\_\_

Social Security No. \_\_\_\_\_

Address \_\_\_\_\_

\*This information will be used for background screening purposes only.