

APPLICATION FOR EMPLOYMENT

(Please attach resume, if available.)

COVER PAGE

ATTN: FACILITY BUILDERS & ERECTORS, INC.

OF PAGES ATTACHED:

From:
Email:
Phone:
Fax:

Notes:

FACILITY BUILDERS & ERECTORS, INC.

3940 E. Miraloma Ave. • Anaheim, California 92806 Phone (714) 577-8060 • Fax (714) 577-8064 www.facilitybuilders.com



APPLICATION FOR EMPLOYMENT

We appreciate your interest in employment opportunities with Facility Builders & Erectors, Inc. Facility Builders & Erectors, Inc. is an equal opportunity employer. The Company's policy is not to unlawfully discriminate against any applicant or employee on the basis of race, color, sex, religion, creed, gender, national origin, age, marital or veteran status, disability, or any other any other legally protected status. The Company also prohibits harassment of applicants and employees based on any of these protected categories.

Note to Applicants: Smoking is prohibited in all indoor areas of the Company unless designated smoking areas have been established by a particular office in accordance with applicable State and local law.

GENERAL INFORMATION

Please complete all requested information. Use ink and print.

	To	oday's Date	Position Applying For	
Name (Last)	(First)	(Middle)	Minimum Salary Desired	Date Available for Work
Street Address			Are you at least 18 years old? () Yes () No
City	State	Zip	Telephone (Home) Telep	hone (Work)
Have you ever used any other name(s) which is (are) necessary for us to know in order for us to verify your employment or educational record? () Yes () No		Are you available to work overtime as needed?		
		() Yes () No		
() ()	,		() 163 () 140	
			If yes, are you available weekda	ys? weekends?
Have you previously			Do you have any relatives now e	mployed at Facility Builders &
employee or through		f our offices either as an	Erectors, Inc.? () Yes () No	
ompleyee or uneagin	an omploymont age	sney .	() 135 () 115	
() Yes () No			If yes, state name(s) and where	they are located.
If yes, please explain	when and, if emplo	yed, in what capacity:		

REFERRAL INFORMATION				
How did you learn about Facility Builders & Erectors, Inc.?				
() Employment Agency (state name):	() School (state name):			
() Reputation of Company	() Newspaper ad (name of paper):			
() Referral (state name):	() Other:			
PERMISSION TO WORK				
If hired, can you present evidence of your legal right to work in the United States? () Yes () No				



WORK EXPERIENCE

Please specify your complete full-time and part-time employment history, including self-employment. You may include any verified work performed on a volunteer basis. Begin with your most recent employer. If you require additional space, please use the reverse side of this page and/or the following page. Also, please attach complete resume to this application.

1	Company Name	Telephone ()
	Address	Employed (Month and Year) From To
	Name, Title, and Phone Number of Supervisor	
	Job Title, and Work Responsibilities	Reason for Leaving:
2	Company Name	Telephone ()
	Address	Employed (Month and Year) From To
	Name, Title, and Phone Number of Supervisor	
	Job Title, and Work Responsibilities	Reason for Leaving:
3	Company Name	Telephone ()
	Address	Employed (Month and Year) From To
	Name, Title, and Phone Number of Supervisor	
	Job Title, and Work Responsibilities	Reason for Leaving:

(Employment record continued on next page.)



4 Company Name

College

High School

Business/Trade/ Technical

				()
Address				Emp	loyed (Month and Year) n To
Name, T	itle, and Phone Number of Su	pervisor			
Job Title	and Work Responsibilities			Reas	son for Leaving:
Please explain	n any gaps in your employm	nent		I	
All employers May we contac	including your current empt t your current employer prior	bloyer may be to making an of	contacted to verify the ir	oformation you pr	ovide.
			ONAL REFEREN to you. Business reference		
Name	Occupation	Phone	A	ddress	Years Known and Capacity
		E D II C A I	TION & TRAININ	2	
	Please inc		et, city, state and zip code		
School	Name and Location of	School	Number of Years Completed	Degree	Type of Course/Major
Graduate			•		•

Telephone



APPLICANT'S STATEMENT & ACKNOWLEDGMENT

THIS APPLICATION MUST BE FULLY COMPLETED, SIGNED, AND ALL STATEMENTS BELOW READ AND INITIALED.

initiai:	I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.
Initial:	I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Company, I will be an at-will employee, meaning that either the Company or I may end the employment relationship at any time with or without cause or notice. I understand that only the President or Vice President of Facility Builders & Erectors, Inc. and no manager, supervisor, or representative of the Company, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and that any such agreement must be in writing and are subject to approval by the Company's Board of Directors.
Initial:	I further understand and agree that, except for employment-at-will status, if hired my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by Facility Builders & Erectors, Inc.
Initial:	I understand that if I am offered employment, I may be required to sign a non-solicitation and non-disclosure agreement, as a condition of employment with Facility Builders & Erectors, Inc.
Initial:	I understand that Facility Builders & Erectors, Inc. may share the information contained in this application with other employees for employment and administrative purposes and hereby consent to the sharing of this information.
Initial:	I hereby authorize Facility Builders & Erectors, Inc. to conduct any necessary investigation regarding my background as it relates to the position I am seeking and to the extent permitted by federal, State and local law. I agree to complete the requisite authorization forms for the background investigation. I hereby release all parties from any liability in connection with the provision and use of such information.
Initial:	I agree to submit to legally permissible drug testing upon an offer of employment from Facility Builders & Erectors,
	Inc. and prior to starting work. I agree that any offer of employment is contingent upon my receiving a negative test result.
Initial:	I understand and expressly agree that, if employed by Facility Builders & Erectors, Inc., storage areas provided for me (locker, desk, etc.) are open to investigation by the Company without prior notice to me.
Initial:	I agree to undergo a pre-employment physical examination consistent with federal and State law.
Initial:	I understand that Facility Builders & Erectors, Inc. has an arbitration procedure governed by the Federal Arbitration Act [9 U.S.C. sections 1 et seq.]. The arbitration procedure applies to claims brought by me against Facility Builders & Erectors, Inc. or by the Company against me. I agree that any claim arising out of or relating to the application process, including, without limitation, a claim alleging unlawful discrimination and/ or harassment, and any claim arising out of or relating to my employment or its termination (if I am offered and accept employment), including, without limitation, a claim of unfair business practices, unlawful employment discrimination, harassment, wrongful demotion and/or wrongful termination, will be presented to a neutral arbitrator for final and binding decision in accordance with procedures adopted by Facility Builders & Erectors, Inc. These procedures do not prevent me from filing a claim or charge with the Equal Employment Opportunity Commission, U.S. Department of Labor or National Labor Relations Board. Nor do these procedures prevent me from making a claim for workers compensation or State disability benefits or unemployment insurance. I understand and agree that I may review Facility Builders & Erectors, Inc.'s arbitration procedures before submitting this application for employment by making a written request for a copy of those procedures from the Company's [HR Manager/Chief Financial Officer/].



SKILLS

Do you have any other experience, skills, or qualifications which you feel would benefit Facility Builders & Erectors, Inc.? If so, please explain.

Please attach complete resume with this application.

ADDITIONAL EMPLOYMENT INQUIRIES

If applying for a position that will include driving	:	
Driver's License Information: State: N	lumber:	Expiration Date:
Restrictions or Suspensions (respond fully if driving	is required by the job for which	ch you are applying):
If hired, you may be required to provide proof of insu	-	
Emergency Contact Person:		
Name	Phone Nur	umber ()
all the understandings between Facility Build	ers & Erectors, Inc. and me	nditions stated in this Application, which contain ne concerning the topics addressed herein, and y Builders & Erectors, Inc. and me on such issues
APPLICANT'S FULL NAME (PLEASE PRINT)	APPLICANT'S SIGNATUR	JRE DATE
This application will only be considered for 90 day you wish to continue to be considered for employments.		