

SUPERIOR DUCT FABRICATION EMPLOYEMENT APPLICATION

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical or mental disability, medical condition, military or veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative. Please print.

Date of Application

Print Name (Last, First, & Mid	dle)				
Street Address		City		State	ZIP Code
Main Phone Number	Alternate Phone Number	Email	Email		
EMPLOYMENT EXPERIENCE List the names of your present first. Be sure to account for al additional page if necessary.			•		
Name of Employer		Supervisor		May we contact?	
				□ Yes □	□ No
Street Address					
Phone Number		Dates Employed (Month/Year)			
		From		То	
Job Title and Duties		Reason for Leaving	3		

Position(s) Applied for



Name of Employer	Supervisor	May we contact?		
		☐ Yes ☐ No		
Street Address				
Phone Number	Dates Employed (Month/Yea	ar)		
	From	То		
Job Title and Duties	Reason for Leaving			
Name of Employer	Supervisor	May we contact?		
		☐ Yes ☐ No		
Street Address				
Phone Number	Dates Employed (Month/Year)			
	From	То		
Job Title and Duties	Reason for Leaving			
	<u> </u>			
Have you ever been involuntarily terminated or asked to resign from any job? \square Yes \square No				
If yes, explain:				
Explain any gaps in your employment history:				
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Superior Duct Pomona 1683 Mount Vernon Ave. Pomona, CA. 91768 PH: (909) 620-8565 Superior Duct Camarillo 166 North Aviador St. Camarillo, CA. 93010 PH: (805) 399-8565 Superior Duct Las Vegas 4050 W. Mesa Vista Ave. Las Vegas, NV. 89118 PH: (702) 505-9143 **Superior Duct Phoenix** 8920 S. McKemy St. Tempe, AZ. 85284 PH:(480) 761-4965



	experience, job relatedevaluating your qualifi			ther qualifi	cations that yo	u believe should be
EDUCATION Describe your	educational backgrou	nd in the table prov				
	School Name	Years Completed	Diploma/ Degree (Yes/No)	Area o	f Study/Major	Specialized Training, Skills, or Extra- Curricular Activities
High School						
College/ University						
Graduate/ Professional School						
Trade School						
Other						
REFERENCES	1	1	1	L		
Name and Title		Relationship			Phone Number	er or Email



GENERA	AL INFORMATION						
1.	. Have you ever used another name? \square Yes \square No						
2.	. Is any additional information relative to name changes, use of an assumed name, or nickname necessary to					name necessary to	
	enable a chec	k on your work	and education	al record?			□ Yes □ No
	If yes to eithe	r of the above,	provide the add	ditional informa	ition:		
3.	Have you eve	r worked for th	is company befo	ore?			□ Yes □ No
	If yes, give d	ates and posit	ion:				_
4.							
5.	5. Are you available to work? ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary						
6.	Days and hou	rs, you are avai	lable to work:				
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7.	Can you travel if the position requires it? ☐ Yes ☐ No						
8.	8. Can you relocate if the position requires it? □ Yes □ No						
9.	9. Are you at least 18 years old? ☐ Yes ☐ No						
	Note: If unde	er 18, hire is si	ubject to verifi	cation that yo	u are of minim	num legal age.	
10	. If hired, can y	ou present evic	lence of your id	entity and lega	l right to work i	n this country?	□ Yes □ No
11	. Are you able t	to perform the	essential job fu	nctions of the jo	ob for which you	u are applying v	with or without
	reasonable accommodation? \square Yes \square No						

Note: We comply with the ADA and consider reasonable accommodation measures that may be

necessary for qualified applicants/employees to perform essential job functions.



APPLICANT STATEMENT AND AGREEMENT

Read and initial each paragraph below. If there is anything that you do not understand, please ask,				
kean ann initial each natagrann neinw. It there is anvining that voll no not linnerstann, niease ask	سطممم امنئنمنا امصمام			da .aa+ada.aa+a.ad .alaaaa aal.
	kean ann inifial each r	naragrann neinw ii	i inere is anvining inal vo	II no not linnerstand, blease ask

Name (print):	Date:
Signature:	
MY SIGNATURE INDICATES THAT I HAVE READ, UNDERST	AND, AND AGREED TO ALL OF THE ABOVE TERMS.
severed, and the remainder of this Agreement shall be enf	orceable.
_	of this Agreement is declared void or unenforceable, it shall be
and legal authority to work in the United States, and that f this regard.	ederal immigration laws require me to complete an I-9 Form in
I understand that if I am selected for hire, it will be n	ecessary for me to provide satisfactory evidence of my identity
	am employed, regardless of the time elapsed before discovery.
	pleted this application. I understand that any omission or by document used to secure employment shall be grounds for
, , ,	rue and correct to the best of my knowledge. I further certify
I understand and agree to comply with federal, state, and	-
-	hat I, and every employee, have a responsibility to prevent nd guidelines and following the directions of my site supervisor.
	mportant to the Company and that the Company is committed
modifications.	
	nnot be amended, modified, or altered in any way by any oral
	ionship for any specific term. I further understand that the at any time, with or without cause, and with or without notice.
	nent with the Company is at-will, and that neither I, nor the
Company.	, , , , , , , , , , , , , , , , , , ,
•	at I am required to comply with all rules and regulations of the
corporations, partnerships and associations from any and related to such investigation or disclosure.	all claims, demands, or liabilities arising out of or in any way
	se the Company, my former employers and all other persons,
	her information related to my work records, without giving me
	igate my references, work record, education and other matters uthorize the prior employers and references I have listed to
I haraby authorize the Company to the roughly invest	igate my references werk record advection and other matters