

APPLICATION FOR EMPLOYMENT

(Pre-employment questionnaire) (an Equal Opportunity Employer)

Personal Information:

Name _____ Date _____

Address _____

Mailing Address (if different) _____

Phone # _____ Are you 18 years or older? Yes No

Employment Desired:

Position _____ Start Date? _____

Are you employed now? _____ May we inquire of your Present Employer? _____

Have you applied to this Company before? _____ Where? _____ When? _____

Referred by _____

Education:

Educational Institution	Name & Location of School	# Years attended	Did you Graduate?	Subjects studied
Grammar School				
High School				
College				
Trade, Business, or Correspondence School				

Subjects of Special Study or Research: _____

Special Skills: _____

Activities (Civic, Athletic, etc): _____

US Military Service: _____ Rank: _____

National Guard or Reserves: _____

Former Employers: (list below last three employers, starting with last one first)

Date Month & Year	Name & Phone # of employer	Position	Reason for Leaving
From			
To			
From			
To			
From			
To			
From			
To			

References: (Give the names of three persons not related to you, whom you have known at least one year)

Name	Address	Phone #	Years Acquainted

“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 investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause.”

Signature _____ Date _____

The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

Material Ventures, Inc.
 dba Sequoia Insulation, Sonora Insulation, Ashlock Energy, Carson Insulation
 PO Box 1420 San Andreas, CA 95249
 (Corporate)

Material Ventures, Inc.

Lic #661757

Pre-Employment Consent Requirements

PRE-EMPLOYMENT DRUG SCREENING

In order to maintain a drug free working environment, and recognizing that the use of alcohol, illegal drugs, or controlled substances, prescription drugs and even use of over the counter drugs may adversely affect the work performance of any employee, I give my consent to the urine sample collection and testing for controlled substances. I understand that the results of this drug test will be used to evaluate my eligibility for hire. The results will not be released to any other parties without my written consent.

Signed: _____

Date: _____

PERSONAL HISTORY VERIFICATION & RELEASE (all positions within company)

I understand that a complete background investigation in order to assess my eligibility for a position requiring a high level of reliability and trustworthiness may be necessary. I give permission to all persons who may have information relevant to this investigation to disclose the requested information. I understand that the investigation may include verification of past employment, review of personnel records maintained by any prior employer, education, and opinions of references.

Approval for release of personal information:

Signed: _____

Date: _____

Rev. Oct 2018

Material Ventures, Inc.

CA Lic. #661757 NV Lic. #0078115

Pre-employment Consent & Release Of Motor Vehicle Record Information

Since all employees might need to drive various corporate vehicles on company business at times during their employment with the company, having and maintaining a good driving record, acceptable by our insurance company standards, is a requirement for employment. By signing this form, you give permission to prospective employer, Material Ventures, Inc., and John Jackson Insurance Service to obtain motor vehicle driving record information from various state departments of motor vehicles for the purpose of underwriting, insurance, adjusting claims and other purposes related to such insurance. I understand that Material Ventures, Inc. shall use such driving records in determining whether to initiate or continue my employment. This consent shall be a continuing consent throughout the period during which I am an applicant of employment with, or an employee of Material Ventures, Inc.

Print Name: _____

State Where License Issued: _____

Drivers License Number: _____

I have read, understood, and give permission to John Jackson Insurance Service to obtain my driving record and release such information to Material Ventures, Inc.

Signature: _____ Date: _____

For Office Use Only

Fax to John Jackson Insurance Service (916) 791-1460 or email to jackson1@surewest.net

Sent by _____ Date _____

PRE-EMP DMV REC (11/2018)