

# THE LOPES COMPANIES



Sand. Stone. Gravel. Site Work. Recycling. Dumpsters. Concrete. Disposal. One Call.

## EMPLOYMENT APPLICATION

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

The Lopes Companies (the "Company") fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, gender, sexual orientation, veteran status, genetic information, disability, or any other basis prohibited by federal, state, or local law. In accordance with requirements of the Americans with Disabilities Act and applicable federal, state, and/or local laws, it is our policy to provide reasonable accommodations upon request during the application process to applicants in order that they may be given a full and fair opportunity to be considered for employment. As an Equal Opportunity Employer, we intend to comply fully with applicable federal, state, and/or local employment laws, and the information requested on this application will only be used for purposes consistent with those laws. To the extent required by applicable law, the Company maintains a smoke-free workplace. The Company is a drug-free workplace and **WE SCREEN ALL APPLICANTS FOR ILLEGAL DRUG USE.**

Today's Date: \_\_\_\_\_ Available Start Date: \_\_\_\_\_

POSITION APPLIED FOR:  Driver  Mechanic  Laborer  Operator  Other: \_\_\_\_\_

### PERSONAL DATA

Name: \_\_\_\_\_  
Last First Middle

Street Address: \_\_\_\_\_ City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

If you are under 18 years of age, please specify your age: \_\_\_\_\_ (This information will be used only for child labor law purposes.)

Are there any days, shifts, or hours you will not work?\*  Yes  No If yes, please explain: \_\_\_\_\_

Will you work overtime, if required?\*  Yes  No Salary expectations: \_\_\_\_\_

**\*Note:** It is not necessary for you to identify unavailability for work because of religious observance or practice or any other protected classification. Subsequent to any job offer, we will consider whether a reasonable accommodation can be made.

How did you learn about our Company? \_\_\_\_\_

Have you ever applied or worked at our Company previously?  Yes  No If yes, provide date(s): \_\_\_\_\_

Do you know anyone who works for this Company?  Yes  No If yes, who?: \_\_\_\_\_

Are you legally authorized to work in the United States? \*  Yes  No

Will you now or in the future require sponsorship for employment visa status (for example, H-1B visa status)?

Yes  No

**\*Note:** The Federal Immigration Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

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### DRIVING RECORD

(Answer only if driving is a requirement for the job for which you are applying.)

Do you have a valid driver's license?  Yes  No Class: \_\_\_\_\_ State: \_\_\_\_\_ License No.: \_\_\_\_\_

Have you had any motor vehicle violations?  Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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### EDUCATION

Name, City, and State of Educational Institution	Graduated		If no, degree credits earned	Type of degree received or expected	Major	Minor	Grade Point/ Overall GPA
	Yes	No					
High School							
College or University							
Technical/GED							
Other Licenses/Certifications: _____ _____ _____							

**EMPLOYMENT HISTORY**

Please complete for all full- or part-time employment beginning with most recent employer. All applicants should provide at least three (3) years of history. (A separate sheet may be attached.) You must explain any gaps in your employment. Applicants who will drive a commercial motor vehicle\* in intrastate or interstate commerce shall also provide an additional seven (7) years of information about those employers for whom the applicant operated such vehicle.

\*Includes vehicles having a GVWR of 26,001 lbs. or more, vehicles designed to transport 15 or more passengers, or any size vehicle used to transport hazardous materials in a quantity requiring placarding.

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Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ May we contact?  Yes  No Telephone: \_\_\_\_\_  
Dates employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

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Job Duties: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

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- Have you ever been discharged or asked to resign from employment?  Yes  No
  - Have you signed any non-competition or non-solicitation agreement or any other kind of agreement with any employer that might prevent or restrict you from working for the Company?  Yes  No (If yes, you will be required to furnish a copy of the agreement if you are being considered for hire.)
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**MEDICAL EXAM AND SUBSTANCE ABUSE SCREENING NOTICE**

If an offer of employment is made to you, the Company may specify that it is contingent upon the results of a medical exam as related to the essential duties and responsibilities of the position. In addition, the Company maintains a drug-free workplace policy and will not tolerate any unlawful activity such as the possession, use, manufacture, and/or distribution of a controlled substance on Company time or Company-owned or controlled property (including vehicles and equipment). Your initial and continued employment by the Company, therefore, is contingent upon, among other things, your successful test result of our drug-screening process. Please note that while certain states have legalized medical or recreational usage, marijuana remains an illegal substance under Federal law.

**MEDICAL EXAM AND SUBSTANCE ABUSE SCREENING ACKNOWLEDGMENT**

I freely and voluntarily agree to submit to a post-offer, pre-employment medical examination and/or a pre-employment drug screen, as it relates to the requirements of a specific position, as part of my pre-employment with the Company. I understand that either refusal to submit to such screening or failure to qualify according to the minimum standards established by the Company for this screening may disqualify me from further consideration for employment. Further, I understand that any positive drug test result will be communicated in a confidential manner.

\_\_\_\_\_  
Applicant's Signature

Printed Name: \_\_\_\_\_

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

**Your hire is contingent upon successfully passing a drug screening, background check, and providing proof of an acceptable motor vehicle driving record, if applicable.**

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**APPLICANT'S ACKNOWLEDGMENT**

I certify this application was completed by me and that the answers given herein and during the entire application process (including, but not limited to information provided in resumes, attachments to this application, interviews, or otherwise, if applicable) are true and complete to the best of my knowledge.

I understand that any misrepresentations, omissions of facts, or incomplete answers during the application process may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts during the application process may be cause for my dismissal at any time without prior notice.

**I consent to and authorize the Company to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment.**

**I further authorize the listed employers, schools, and references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.**

I EXPRESSLY AGREE AND UNDERSTAND THAT IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT, AND MAY BE TERMINATED BY ME OR THE COMPANY WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME REGARDLESS OF THE SUCCESSFUL COMPLETION OF ANY INTRODUCTORY OR PROBATIONARY PERIOD. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE, OR OTHER PROCEDURE (INCLUDING EMPLOYEE HANDBOOK OR ANY EMPLOYEE MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE COMPANY. I FURTHER UNDERSTAND THAT NO RECRUITER, INTERVIEWER, OR OTHER REPRESENTATIVE OF THE COMPANY, OTHER THAN THE OWNER, PRESIDENT, OR CEO, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, AND NONE HAS DONE SO. I ALSO UNDERSTAND THAT MY AT-WILL EMPLOYMENT STATUS WITH THE COMPANY MAY ONLY BE ALTERED IN AN INDIVIDUAL CASE OR GENERALLY IN A WRITING SIGNED BY THE OWNER, PRESIDENT, OR CEO OF THE COMPANY.

I understand I may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests. If I am offered employment or start work before any required test is completed, I understand that my employment is contingent on a satisfactory result on all required tests.

I understand and agree as a pre-requisite to employment that I will be required to take and pass a pre-employment drug screening. I also agree to take a drug and/or alcohol test at any time in compliance with the Company's procedures and that the test results must be satisfactory to the Company. I authorize the release of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document. I agree to sign any additional forms necessary for drug tests to be conducted. I also agree to take a post-offer medical examination if requested. I understand that any offer to hire is conditioned upon results satisfactory to the Company of any required pre-employment test, substance abuse test, background investigation, and Company medical examination or inquiries. Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, shift work, or a rotating work schedule that includes Saturday and/or Sunday work. If hired, I understand and accept these as conditions of my continued employment.

**DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE STATEMENTS CONTAINED IN THIS APPLICANT'S ACKNOWLEDGMENT.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_