

## APPLICATION FOR EMPLOYMENT

It is the policy of Tip Top Roofing & Sheet Metal, Inc. to provide equal employment opportunities without regard to race, color, sex, national origin, age, disability or any other condition protected by law. No question on this application is asked for the purpose of limiting or excluding any applicant's consideration for employment because of his or her race, color, religion, sex, national origin, age, disability or any other condition protected by law.

### Personal Information

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

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

Telephone: \_\_\_\_\_ Home \_\_\_\_\_ Other  
Please include Area Code Please include Area Code

Social Security Number (SSN): \_\_\_\_\_

Type of Work desired: \_\_\_ *Roofer* \_\_\_ *Roofing Laborer* \_\_\_ *Sheet Metal Journeyman* \_\_\_ *Sheet Metal Laborer*

Wages expected: \$ \_\_\_\_\_ per hour

If under 18 years of age, do you have a work permit? (Please circle) Yes No

Are you either a U.S. citizen or legally authorized to work in the United States? (Please circle) Yes No  
**(You will be required to provide proof of citizenship or right to work status at time of hire)**

Have you ever been convicted of a crime? (Please circle) Yes No *(if No, skip to page 2)*

If yes, for what offense, where and when? (Conviction will be considered in light of the job(s) in which you are applying)

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### MISSION STATEMENT

"To always deal fairly and honestly with all people and companies we encounter and to provide them with the utmost products and service in the industry."

## Education

Please circle Highest Grade Completed:

Grade School/High School: 1 2 3 4 5 6 7 8 9 10 11 12  
College/Graduate School: 1 2 3 4 5 6 7 more

### High School:

School Name: \_\_\_\_\_ Location: \_\_\_\_\_

Major Field: \_\_\_\_\_ Degree: \_\_\_\_\_

Dates attended: *From* \_\_\_\_\_ *to* \_\_\_\_\_ Date Graduated: \_\_\_\_\_

### College:

School Name: \_\_\_\_\_ Location: \_\_\_\_\_

Major Field: \_\_\_\_\_ Degree: \_\_\_\_\_

Dates attended: *From* \_\_\_\_\_ *to* \_\_\_\_\_ Date Graduated: \_\_\_\_\_

### Graduate School:

School Name: \_\_\_\_\_ Location: \_\_\_\_\_

Major Field: \_\_\_\_\_ Degree: \_\_\_\_\_

Dates attended: *From* \_\_\_\_\_ *to* \_\_\_\_\_ Date Graduated: \_\_\_\_\_

### Technical School:

School Name: \_\_\_\_\_ Location: \_\_\_\_\_

Major Field: \_\_\_\_\_ Degree: \_\_\_\_\_

Dates attended: *From* \_\_\_\_\_ *to* \_\_\_\_\_ Date Graduated: \_\_\_\_\_

## Professional Licenses and/or Certifications

Type	Organization or State Issued	Date Issued	License Number
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# TIP TOP ROOFING

Quality Roofing Since 1958™

TIP TOP ROOFING & SHEET METAL, INC.  
1110 Putman Drive • Huntsville, Alabama 35816 • Office: (256) 837-8880 • Fax: (256) 895-9590

## Previous Work Experience

Present or last Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City State Please include Area Code

Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Please include Area Code

Position/Duties: \_\_\_\_\_ Salary: \_\_\_\_\_ per hour

Dates of Employment: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City State Please include Area Code

Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Please include Area Code

Position/Duties: \_\_\_\_\_ Salary: \_\_\_\_\_ per hour

Dates of Employment: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
City State Please include Area Code

Supervisor's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Please include Area Code

Position/Duties: \_\_\_\_\_ Salary: \_\_\_\_\_ per hour

Dates of Employment: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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## Military Service

Were you in the U.S. Armed Forces? (Please circle one) Yes No

If yes, which branch? Air Force Army Marines Navy Coast Guard Reserves

Date of duty: From \_\_\_\_\_ to \_\_\_\_\_

Rank at time of discharge: \_\_\_\_\_

Special training or duties while in Military: \_\_\_\_\_

Are you currently a member of a reserve unit? (Please circle one) Yes No

## Personal References

(Do not list relatives or former employers)

Name	Address	Telephone Number
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_____	_____	_____
_____	_____	_____

## Applicant Certification

I certify that all information given on this application is true, correct, and complete. I understand that misrepresentation or omission of facts will be cause for cancellation of my consideration for employment, or dismissal if employed. I authorize any inquire to be made on any information contained in this application if I am considered for employment.

I understand that this is an application for employment and that no employment contract is being offered; and I understand that if employed, such employment is for an indefinite period and is subject to change in wages, benefits, and operation policies.

I further understand that an offer of employment will be conditioned upon the successful completion of a physical examination including a drug test and that continued employment will be subject to the terms and conditions of the Company's Drug and Alcohol Policy.

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

This application will remain active for **45** days.

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## Physical and Medical Information

In responding to the following questions, please refer to the attached job description for the position in which you are seeking employment for. \*

Do you have any physical or mental condition, which would substantially interfere with our ability to perform the essential duties for which you have applied or for which you will need reasonable accommodations?

(Please circle one)

Yes

No

If yes, please describe:

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Name, address and phone number of physician having records and/or knowledge of your medical history:

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

Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

May we contact your physician for information on your medical history?

(Please circle one)

Yes

No

Will you authorize, if necessary, a release of your medical records to assist us in determining your fitness to perform any physical activities related to the job(s) for which you are applying? (Please circle) **Yes** **No**

\* The responses to these questions will not be taken into consideration until after a conditional job offer has been made.

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