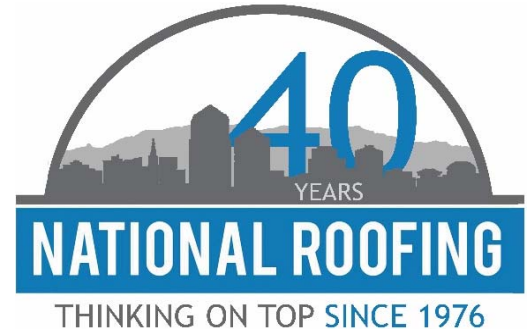


APPLICATION FOR EMPLOYMENT

3408 COLUMBIA DRIVE NE, ALBUQUERQUE, NM 87107

W 505.883.3000 | F 505.883.3222 | E HR@NATIONALROOFING.COM



Printed Name:

Date:

Position Applying For:

How Did You Hear About Us?

Welcome to National Roofing Company!

Before completing this Application for Employment, we want you to know a few things:

As part of the application process, National Roofing will verify information from your application form. If you report false, inaccurate, misleading, or incomplete information, we may reject your application, or terminate your employment if we discover such information after you've been hired.

The purpose of the application is to give you the opportunity to provide National Roofing with information about your skills, experience, abilities, and other attributes that meet the qualification requirements for the available position. Please understand that a number of people will apply for open positions, and National Roofing does not guarantee anyone an interview or consideration beyond completing the application for employment.

National Roofing Company is an **Equal Employment Opportunity** Employer. It is our policy to select the most qualified individual for the job, regardless of any protected classification. We comply with all applicable state and federal laws prohibiting discrimination. We encourage you to provide us with complete and accurate information that demonstrates your qualifications to perform the duties of the job you are applying for.

National Roofing Company is a **Drug Free** workplace. We want you to understand that part of the hiring process includes a drug test and criminal background check.

We appreciate your interest with our company.

You can learn more about us at www.NationalRoofing.com.

Full Name (Printed): _____

Social Security Number: _____ Phone Number: _____

Current Address: _____

Emergency Contact Name & Phone Number: _____

Email Address: _____

Date Available to Start: _____ Desired Wage: \$ _____

PROFESSIONAL EXPERIENCE
PLEASE START WITH YOUR MOST RECENT, AND WORK BACKWARDS

Name & Address of Employer:	Employment Dates		Describe Duties Performed:	Reason for Leaving:
	From (MM/YY)	To (MM/YY)		<input type="checkbox"/> Discharge <input type="checkbox"/> Layoff <input type="checkbox"/> Resignation
	Starting Pay	Final Pay:		Explain:
	\$	\$		
Name & Phone Number of Supervisor:	Position Held:	Position Held:		May we contact this employer?
Type of Business:				<input type="checkbox"/> Yes <input type="checkbox"/> No

Name & Address of Employer:	Employment Dates		Describe Duties Performed:	Reason for Leaving:
	From (MM/YY)	To (MM/YY)		<input type="checkbox"/> Discharge <input type="checkbox"/> Layoff <input type="checkbox"/> Resignation
	Starting Pay	Final Pay:		Explain:
	\$	\$		
Name & Phone Number of Supervisor:	Position Held:	Position Held:		May we contact this employer?
Type of Business:				<input type="checkbox"/> Yes <input type="checkbox"/> No

Name & Address of Employer:	Employment Dates		Describe Duties Performed:	Reason for Leaving:
	From (MM/YY)	To (MM/YY)		<input type="checkbox"/> Discharge <input type="checkbox"/> Layoff <input type="checkbox"/> Resignation
	Starting Pay	Final Pay:		Explain:
	\$	\$		
Name & Phone Number of Supervisor:	Position Held:	Position Held:		May we contact this employer?
Type of Business:				<input type="checkbox"/> Yes <input type="checkbox"/> No

If hired, can you provide proof of identity and authorization to work in the United States on an unrestricted basis? Yes No

Are you currently employed? Yes No

If yes, may we contact your present employer? Yes No

Have you ever worked for National Roofing Company or any of our affiliates? Yes No

If yes, are you eligible for rehire? Yes No

Provide your dates of previous employment & location worked:

Do you have a valid driver's license in the state of New Mexico? Yes No

If no, do you have reliable transportation? Yes No

List any working experience, skills, or abilities that are relevant to this position:

List any training, professional licenses, certifications, or associations you have:

I certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions, or misrepresentations may result in my dismissal. I authorize National Roofing Company to make an investigation of any of the facts set forth in this application.

I understand that National Roofing Company may give me a conditional job offer, following which I may be required to furnish information regarding medical conditions & history, as well as information regarding any pre-existing permanent physical impairments. I further understand that once given a conditional job offer I will be required to submit to pre-employment testing for the illegal use of drugs.

I have read or been read this employment application and understand it.

Signature: _____

Date: _____

FOR OFFICE USE ONLY

U Q1 Q2
Hired?
 Yes No

Background Check Results:

Position & Department:

Salary / Wage:

Start Date:

AUTHORIZATION FOR RELEASE OF INFORMATION/CONSUMER REPORT CONSENT (EMPLOYMENT)

I, _____, acknowledge that National Roofing Company, with whom I am employed, or to whom I have submitted an employment application, has advised me that the information requested below concerning my background is required to assist the Company in making an employment determination.

I hereby authorize the Company, its agents, or designated representatives bearing this document, or a copy hereof, to obtain information relating to my educational, credit, employment, and criminal history background from any law enforcement, criminal, justice, or other government agencies, employers, ex-employers, and individual persons. Any and all agencies, organizations, institutions, governmental bodies, companies or individuals are released from any liability for providing this information.

Furthermore, I hereby release any individual of the Company to include, but not limited to, record custodians, directors, agents, employees, or any other authorized representatives of the Company from any and all liability for damages of whatever kind and nature, which may at any time accrue to me on account of (1) reliance by such persons on the information submitted in my employment application; (2) reliance by such persons on the information obtained pursuant to this authorization; (3) compliance with, or any attempts to comply with, this authorization; and (4) termination of my employment, if commenced, based upon information developed pursuant to this authorization.

I hereby certify that all statements and answers set forth on my application are true and complete to the best of my knowledge, and I understand that subsequent to employment if any such statements and/or answers are found false or that information has been intentionally omitted, such false statements or omissions will be just cause for termination of my employment.

I hereby acknowledge that I have read and understand the Federal Fair Credit Reporting Act Consumer Report Disclosure regarding the obtaining of a Consumer Report about me from a Consumer Reporting Agency. I hereby authorize the Company to obtain Consumer Reports from Consumer Reporting Agencies to aid in its determination of whether to hire or continue to employ me. I understand that I have certain rights under the Fair Credit Reporting Act, as disclosed in the Disclosure, and that I can receive further information regarding my rights by contacting the Federal Trade Commission.

I hereby certify that I have read and understand the foregoing.

Printed Full Name: _____

Date of Birth: _____

SSN: _____

Present Address: _____

Previous Address: _____

Signature:

Date:



**AUTHORIZATION FOR RELEASE OF INFORMATION/ CONSUMER REPORT
CONSENT (EMPLOYMENT)**

I, _____, acknowledge that **NATIONAL ROOFING COMPANY, INC.** with whom I am employed, or to whom I have submitted an employment application, has advised me that the information requested below concerning my background is required to assist the Company in making an employment determination. The information developed and this document also may be used in determining my qualifications for future assignments and/or retention.

I hereby authorize the Company, its agents, or designated representatives bearing this document, or a copy hereof, to obtain information relating to my educational, credit, employment, and criminal history background from any law enforcement, criminal justice, or other government agencies, employers, ex-employers, and individual persons. Any and all agencies, organizations, institutions, governmental bodies, companies or individuals are released from any liability for providing this information.

Furthermore, I hereby release any individual of the Company to include, but not limited to, record custodians, directors, agents, employees or any other authorized representatives of the Company from any and all liability for damages of whatever kind and nature, which may at any time accrue to me on account of (1) reliance by such persons on the information submitted in my employment application; (2) reliance by such persons on the information obtained pursuant to this authorization; (3) compliance with, or any attempts to comply with, this authorization; and (4) termination of my employment, if commenced, based upon information developed pursuant to this authorization.

I hereby certify that all statements and answers set forth on my application are true and complete to the best of my knowledge, and I understand that subsequent to employment if any such statements and/or answers are found false or that information has been intentionally omitted, such false statements or omissions will be just cause for termination of my employment.

I hereby acknowledge that I have read and understand the Federal Fair Credit Reporting Act Consumer Report Disclosure-Pre Adverse Action regarding the obtaining of a Consumer Report about me from a Consumer Reporting Agency. I hereby authorize the Company to obtain Consumer Reports from Consumer Reporting Agencies to aid in its determination of whether to hire or continue to employ me. I understand that I have certain rights under the Fair Credit Reporting Act, as disclosed in the Disclosure, and that I can receive further information regarding my rights by contacting the Federal Trade Commission.

I hereby certify that I have read and understand the foregoing.

PRINTED NAME:

OTHER NAMES USED / ALIAS:

DATE OF BIRTH:

SOCIAL SECURITY NUMBER:

DRIVER'S LICENSE / ID NUMBER & STATES ISSUED:

ADDRESS:

LIST ALL STATES OF RESIDENCY FOR THE PAST 10 YEARS:

SIGNATURE:

DATE:

FEDERAL FAIR CREDIT REPORTING ACT CONSUMING REPORT DISCLOSURE (EMPLOYMENT)

DISCLOSURE (PRE ADVERSE ACTION LETTER)

In considering whether to make you an offer of employment, whether to continue your current employment, or in order to make other employment decisions, **NATIONAL ROOFING COMPANY, INC.** may wish to obtain and use a Consumer Report about you from a Consumer Reporting Agency. Under the terms of the Federal Fair Credit Reporting Act, you are defined as a Consumer because of your status as a potential or current Company employee.

Consumer Reporting Agencies are business that gather and sell information about you—such as where you work or live, if you pay your bills on time, and whether you’ve been sued, arrested or filed for bankruptcy—to creditors, employers, and other businesses.

A Consumer Report is any written, oral, or other communication of any information by a Consumer Reporting Agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or collected for purposes of serving as a factor in establishing your eligibility for employment purposes.

Before **NATIONAL ROOFING COMPANY, INC.** takes any adverse action that directly affects you, including the decision not to hire you or not to continue your employment, based in part on information contained in a Consumer Report, you will be provided with a copy of such Report as well as the Federal Trade Commission’s summary of your rights as a consumer. In addition, you can receive further information regarding your rights by contacting the Federal Trade Commission.

A Summary of Your Rights Under the Fair Credit Reporting Act

The Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you -- such as where you work and live, if you pay your bills on time, and whether you’ve been sued, arrested, or filed for bankruptcy -- to creditors, employers, and other businesses. The FCRA gives you specific rights in dealing with CRAs, and requires them to provide you with a summary of these rights as listed below. You can find the complete text of the FCRA, 15 U.S.C. 1681 et. seq., at the Federal Trade Commission’s web site (<http://www.ftc.gov>).

- **You must be told information in your file has been used against you.** Anyone who uses information from a CRA to take action against you -- such as denying an application for credit, insurance, or employment -- must give you the name, address, and phone number of the CRA that provided the report.
- **You can find out what is in your file.** A CRA must give you all the information in your file, and a list of everyone who has requested it recently. However, you are not entitled to a “risk score” or a “credit score” that is based on information in your file. There is no charge for the report if your application was denied because of information supplied by the CRA, and if you request the report within 60 days of receiving the denial notice. You are also entitled to one free report a year if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you a fee of up to eight dollars.
- **You can dispute inaccurate information with the CRA.** If you tell a CRA that your file contains inaccurate information, the CRA must reinvestigate the items (usually within 30 days) unless your dispute is frivolous. The CRA must pass along to its source all relevant information you provided. The CRA also must supply you with written results of the investigation and a copy of your report, if it has changed. If an item is altered or deleted because you dispute it, the CRA cannot place it back in your file unless the source of the information verifies its accuracy and completeness, and the CRA provides you a written notice that includes the name, address and phone number of the source.
- **Inaccurate information must be deleted.** A CRA must remove inaccurate information from its files, usually within 30 days after you dispute its accuracy. The largest credit bureaus must notify other national CRAs if items are altered or deleted. However, the CRA is not required to remove data from your file that is accurate unless it is outdated or cannot be verified.
- **You can dispute inaccurate items with the source of the information.** If you tell anyone -- such as a creditor who reports to a CRA -- that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, they may not continue to report it if it is in fact an error.
- **Outdated information may not be reported.** In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.
- **Access to your file is limited.** A CRA may provide information about you only to those who have a need recognized by the FCRA -- usually to consider an application you have submitted to a creditor, insurer, employer, landlord, or other business.
- **Your consent is required for reports that are provided to employers or that contain medical information.** A CRA may not report your employer, or prospective employer, about you without your written consent. A CRA may not divulge medical information about you without your permission.
- **You can stop a CRA from including you on lists for unsolicited credit and insurance offers.** Creditors and insurers may use file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must

include a toll-free number for you to call and tell the CRA if you want your name and address excluded from future lists or offers. If you notify the CRA through the toll-free number, it must keep you off the lists for two years. If you request and complete the CRA form provided for this purpose, you can have your name and address removed indefinitely.

- **You may seek damages from violators.** You may sue a CRA or other party, in state or federal court for violations of the FCRA. If you win, the defendant may have to pay damages and reimburse you for attorney fees. If you lose and the court specifically finds you sued in bad faith, you or your attorney may have to pay the defendant's fees.

You may have additional rights under state law. You may wish to contact a state or local consumer protection agency or a state attorney general to learn those rights.

If you have questions or believe your file contains errors, call SOS INTERNATIONAL at 505 890 0537.