



# HARNES ROOFING, INC.

*Covering the Ozarks for over 25 years*

415 South Main ♦ Harrison, Arkansas 72601 ♦ Office 870.741.0245 ♦ Fax 870.741.8986

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## **PRE-EMPLOYMENT DRUG TESTING CONSENT AND RELEASE FORM**

I hereby consent to submit to urinalysis and/or other tests as shall be determined by Harness Roofing in the selection process of applicants for employment, for the purpose of determining the drug content thereof.

I agree that any certified drug testing facility may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the company for analysis.

I further agree to and hereby authorize the release of the results of said tests to Harness Roofing. I understand that it is the current illegal use of drugs and/or abuse of alcohol that prohibits me from being employed at Harness Roofing.

I further agree to hold harmless Harness Roofing and its agents (including the above named physician or clinic) from any liability arising in whole or part out of the collection of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my employment application.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original.

I have carefully read the foregoing and fully understand the contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

Applicant  
Print Name: \_\_\_\_\_ S.S.# \_\_\_\_\_

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

Witness  
Print Name: \_\_\_\_\_ S.S.# \_\_\_\_\_

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

Please Print

**Harness Roofing, Inc.**

**Application for Employment**



**NOTICE TO ALL APPLICANTS AND EMPLOYEES**  
Screening tests for alcohol and illegal drug use may be required before hiring and during your employment here.

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for \_\_\_\_\_ Date of application \_\_\_/\_\_\_/\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Street City State Zip Code

Telephone # (\_\_\_\_) \_\_\_\_\_ Mobile/Beeper/Other # (\_\_\_\_) \_\_\_\_\_ E-mail Address \_\_\_\_\_

Referral Source (How did you hear about us?) \_\_\_\_\_

If you are under 18, and it is required, can you furnish a work permit?.....  Yes  No

If **no**, please explain \_\_\_\_\_

Have you ever been employed here before? If **yes**, give dates and positions \_\_\_\_\_  Yes  No

Are you legally eligible for employment in this country? .....  Yes  No

Date available for work..... \_\_\_/\_\_\_/\_\_\_ What is your desired salary range? .....\$ \_\_\_\_\_

Type of employment desired  Full-Time  Part-Time  Temporary  Seasonal  Educational Co-Op

Driver's license number if driving may be required in position for which you are applying \_\_\_\_\_ State \_\_\_\_\_

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime?.....  Yes  No

If **yes**, please provide date(s) and details \_\_\_\_\_

This job may require weekend, overtime, holiday, and out of town work. Would you be available for these work requirements? \_\_\_\_\_

If **no**, please explain \_\_\_\_\_

**Employment History**

Starting with your most recent employer, provide the following information.

Employer	Telephone #	Dates employed:	to
Street Address	City	State	Hourly rate/salary: Start \$ per Final \$ per
Starting job title/ final job title		Why did you leave?	
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Summarize the type of work performed and job responsibilities:
Employer	Telephone #	Dates employed:	to
Street Address	City	State	Hourly rate/salary: Start \$ per Final \$ per
Starting job title/ final job title		Why did you leave?	
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Summarize the type of work performed and job responsibilities:
Employer	Telephone #	Dates employed:	to
Street Address	City	State	Hourly rate/salary: Start \$ per Final \$ per
Starting job title/ final job title		Why did you leave?	
Immediate supervisor and title (for most recent position held)	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		Summarize the type of work performed and job responsibilities:

*AN EQUAL OPPORTUNITY EMPLOYER*

## Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying: \_\_\_\_\_  
\_\_\_\_\_

## Educational Background

Starting with your most recent school attended, provide the following information;

School (include City & State)	Years Completed	Degree Earned	GPA Class Rank	Major/Minor

## References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship	Telephone	# years known

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservations, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete and I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment, or may result in my immediate discharge from the employer's service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_