



# GRAHAM ROOFING INC.

## ALABAMA

*Tuscaloosa*  
(205) 366-9495  
FAX (662) 492-9591

## MISSISSIPPI

*West Point*  
680 West Tibbee Road  
West Point, MS 39773  
(662) 492-9555  
FAX (662) 492-9591

## TENNESSEE

*Tupelo*  
136 Bauhaus Drive  
Saltillo, MS 38866  
(662) 869-0012  
FAX (662) 869-7800

*Jackson*  
(731) 427-1247  
FAX (662) 869-7800

[www.grahamroofing.com](http://www.grahamroofing.com)

## APPLICATION FOR EMPLOYMENT

Graham Roofing Incorporated is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

Date \_\_\_\_\_

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

Address \_\_\_\_\_  
Number & Street City State Zip

Do you have a valid driver's license? \_\_\_ Yes \_\_\_ No Do you have a commercial driver's license (A or B)?  
If so, what class? \_\_\_\_\_

Position Applying For \_\_\_\_\_ Full Time \_\_\_ Part Time \_\_\_

Phone Number (s) \_\_\_\_\_ Email Address \_\_\_\_\_

Date Available \_\_\_\_\_ Salary Desired \_\_\_\_\_

Are you over 18 years old? \_\_\_ Yes \_\_\_ No Are you over 21 years old? \_\_\_ Yes \_\_\_ No  
(Must be 18 to work) (Must be 21 to drive a company vehicle)

Are you legally eligible for employment in the United States? \_\_\_ Yes \_\_\_ No  
(If offered employment, you will be required to provide documentation to verify eligibility.)

Have you ever been employed by Graham Roofing in the past? \_\_\_ Yes \_\_\_ No  
If so, please state facility name and location and dates of employment \_\_\_\_\_

**EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.**

**High School:** No. of Years Completed (circle one) 1 2 3 4

**Diploma:** \_\_\_ Yes \_\_\_ No **G.E.D.** \_\_\_ Yes \_\_\_ No

**College and/or Vocational School:**

Number of Years Completed (circle one) 1 2 3 4

School(s) \_\_\_\_\_ City/State \_\_\_\_\_

Major \_\_\_\_\_ Degree(s) Earned \_\_\_\_\_

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Other Training or Degrees:

School(s) \_\_\_\_\_ City/State \_\_\_\_\_

Course \_\_\_\_\_ Degree or Certificate Earned \_\_\_\_\_

SKILLS: Do you have any roofing experience? \_\_\_ Yes \_\_\_ No If so, what type of roofing experience and how long:

List skills, equipment, technical materials and software you have experience with:

EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? \_\_\_ Yes \_\_\_ No

If any employment was under a different name, indicate name. \_\_\_\_\_

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Job Position \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_
Mo/Yr Mo/Yr

Hourly Rate \_\_\_\_\_ Supervisor or Contact Name \_\_\_\_\_

Duties \_\_\_\_\_ Full-time \_\_\_ Part-time \_\_\_ No. of Hrs. \_\_\_\_\_

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

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Job Position \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_
Mo/Yr Mo/Yr

Hourly Rate \_\_\_\_\_ Supervisor or Contact Name \_\_\_\_\_

Duties \_\_\_\_\_ Full-time \_\_\_ Part-time \_\_\_ No. of Hrs. \_\_\_\_\_

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

**APPLICATION FOR EMPLOYMENT**

Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Job Position \_\_\_\_\_

Dates of Employment: From \_\_\_\_\_ to \_\_\_\_\_  
Mo/Yr Mo/Yr

Hourly Rate \_\_\_\_\_ Supervisor or Contact Name \_\_\_\_\_

Duties \_\_\_\_\_ Full-time \_\_\_ Part-time \_\_\_ No. of Hrs. \_\_\_\_\_

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

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Telephone \_\_\_\_\_ Job Position \_\_\_\_\_

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Mo/Yr Mo/Yr

Hourly Rate \_\_\_\_\_ Supervisor or Contact Name \_\_\_\_\_

Duties \_\_\_\_\_ Full-time \_\_\_ Part-time \_\_\_ No. of Hrs. \_\_\_\_\_

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

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Employer \_\_\_\_\_ Address \_\_\_\_\_

Telephone \_\_\_\_\_ Job Position \_\_\_\_\_

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Hourly Rate \_\_\_\_\_ Supervisor or Contact Name \_\_\_\_\_

Duties \_\_\_\_\_ Full-time \_\_\_ Part-time \_\_\_ No. of Hrs. \_\_\_\_\_

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

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If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Explain any gaps in work history: \_\_\_\_\_

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Have you ever been discharged or asked to resign from a job? \_\_\_ Yes \_\_\_ No

If yes, explain: \_\_\_\_\_

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**APPLICATION FOR EMPLOYMENT**

**REFERENCES:** *Please list the names of any employees that you know working at Graham Roofing.*

**Reference # 1**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Phone** (\_\_\_\_\_) \_\_\_\_\_

**Reference # 2**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Phone** (\_\_\_\_\_) \_\_\_\_\_

**Reference # 3**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Phone** (\_\_\_\_\_) \_\_\_\_\_

**Reference # 4**

**Name** \_\_\_\_\_

**Address** \_\_\_\_\_  
\_\_\_\_\_

**Phone** (\_\_\_\_\_) \_\_\_\_\_

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Graham Roofing Incorporated to verify their accuracy and to obtain reference information on my work performance. I hereby release Graham Roofing Incorporated from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment, or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

**I understand that I must successfully complete the drug and / or alcohol testing requirements before beginning work at Graham Roofing Incorporated.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**This application for employment is good for six (6) months only.  
Consideration for employment after six (6) months requires a new application.**