

Application for Employment

Pre-Employment Questionnaire

KEMCO Industries, Inc. - An Equal Opportunity Employer

KEMCO Industries, Inc. is an equal opportunity employer and its policy is to fill every position without regard to race, religious creed, color, national origin, ancestry, age, physical disability, mental disability, medical condition, marital status, sexual orientation, sex or other considerations made unlawful under state or local laws.

Date of Application: _____

Personal Information:

Name (Last Name, First)		Social Security Number (last 4 digits only) XXX - XX -	
Present Address	City	State	Zip Code
Previous Address	City	State	Zip Code
Phone No.	Email Address		

In case of Emergency Notify:

Name _____ Phone _____

Address _____

Employment Desired:

Position Desired	Date you can Start	Salary Desired
Are you employed? Yes ____ No ____	If so, may we inquire of your present employer? Yes ____ No ____	
Ever applied for a position with KEMCO Industries, Inc. before? Yes ____ No ____	If yes, when?	Referred By

Employment Eligibility:

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes _____ No _____

Are you over 18 years of age? ____ If hired, can you show proof of age? Yes ____ No ____

Are you capable of performing in a reasonable manner the essential duties of the job for which you are applying with or without reasonable accommodation on the part of the employer? Yes _____ No _____

Education:

Name and Location of School		Years Attended	Did you Graduate?	Areas of Study
High School				
College				
Trade, Business, or Other Schools				

Military Service Record:

Were you in the U.S. Armed Forces? Yes ____ No ____

If yes, what branch? _____

List assigned duties, including special training: _____

Have you taken any training under the G.I Bill of Rights? Yes ____ No _____

If yes, what training did you take? _____

Former Employers:

(List last four employers, starting with last one first)

Date: Month and Year	Name of Employer	Phone Number	Salary	Position	Reason for Leaving
From					
To					
From					
To					
From					
To					
From					
To					

List Special Skills: _____

Do you have any relatives working for KEMCO Industries, Inc.? Yes ____ No ____

If yes, give name and position _____

Criminal Record:

(Background check will be run – lack of full disclosure may result in termination)

Have you ever been convicted of a non-marijuana related felony or misdemeanor?
Yes ____ No ____ (Conviction will not necessarily disqualify you from employment).

Have you ever been convicted on a marijuana related felony or misdemeanor within the last two year?
Yes ____ No ____ (Conviction will not necessarily disqualify you from employment).

Are you presently under arrest, out on bail, or on your own recognizance pending trial for a felony or misdemeanor? Yes ____ No ____ (Conviction will not necessarily disqualify you from employment).

If you answered yes to any of the above, please explain:

Driving Eligibility:

Do you have a valid driver's license? Yes ____ No ____

Driver's License # _____ State: _____ Expiration Date: _____ Type: _____

Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes ____ No ____

References:

(Give Below the Names of Three Persons Not Related to You, Whom You Have Know at Least One Year)

Name	Address	Phone Number	Relationship to you

Authorization:

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all my statements contained herein and the references and employers listed above to give KEMCO Industries, Inc. any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I am also aware that a background check will be run on me and/or a DMV records check done in connection with obtaining employment with KEMCO Industries, Inc. & I give my consent for both.

***** Very Important, Please Read *****

I understand that KEMCO Industries, Inc. is an "At-Will" employer. If hired, I understand that my employment relationship with KEMCO Industries, Inc. may be terminated with or without cause, at any time, and with or without advanced notice. No employee or representative of the KEMCO Industries, Inc., other than the Company President, has the authority to change this policy or to enter into any employment agreement with any employee for any specific duration. No change to this "At-Will" policy is valid unless it is in writing and signed by the Company President.

I agree, if hired, there will be no other express or implied agreements contrary to my at-will status.

Date: _____ Signature: _____

EMPLOYER USE ONLY:

Start Date: _____

Agency Name: _____

Full Term or Payroller: _____

Pay Rate: _____

Position: _____

Additional Information:

Employee Invitation to Self-Identify – KEMCO INDUSTRIES, INC

The employer is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the employer invites employees to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify and specific individual.

As government contractors, we also comply with government regulations including but not limited to affirmative action responsibilities as required under Executive Order 11246, Section 503 of the Rehabilitation Act of 1973, Section 4212 of the Vietnam Era Veterans Readjustment Act of 1974 and Veterans Employment Opportunities Act (VEOA) of 1998. This data is for periodic government reporting and will be kept in a confidential file separate from the application for employment and employee file.

Thank you for your participation!

NAME: _____

JOB POSITION: (for which I am applying) _____

GENDER: Female Male I do not want to self-identify my gender

RACE/ETHNICITY: Please note that for tracking purposes only one race/ethnic group can be listed. If you are of more than one group, please check the box for the group with which you most closely identify.

- Hispanic or Latino** – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race
- White** (not Hispanic or Latino) - A person having origins in any of the original people of Europe, North Africa, or the Middle East
- Black or African American** (not Hispanic or Latino) - A person having origins in any of the Black racial groups of Africa
- Native Hawaiian or Other Pacific Islander** (not Hispanic or Latino) - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
- Asian** (not Hispanic or Latino) - A person having origins in any of the peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian/Alaskan Native (Tribal Affiliation)** (not Hispanic or Latino) - A person having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community identification.
- Two or More Races** (not Hispanic or Latino) - A person identified with two or more races and NOT of Hispanic origin.
- I do not want to self-identify my ethnicity**

VETERANS STATUS: Please complete if you served in any branch of the U.S. military

- Disabled Veteran** - (1) A veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.
- Recently Separated Veteran** - Any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval or air service.
- Armed Forces Service Medal Veteran** - Any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.
- Other Protected Veteran** - Any other veterans who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, other than special disabled veterans or veterans of the Vietnam era.
Separation Date: _____
- I do not want to self-identify my veteran status**

DISABILITY:

- Yes** - A person who (A) has a physical or mental impairment which substantially limits one or more major life activities; (B) has a record of such impairment; or (C) is regarded as having such impairment.
- No**
- I do not want to self-identify my disability status**