

**PREFERRED  
INDUSTRIAL  
CONTRACTORS, INC.**  
6700 I-10 East  
Baytown, Texas 77520

# APPLICATION FOR EMPLOYMENT

**OFFICE USE ONLY**

DATE \_\_\_\_\_

OFFICE USE ONLY	
Job Number	_____
Location	_____
Submitted By	_____
Date	_____

1. Please read "APPLICANT NOTE".
2. Complete all pages of this form.
3. If more space is needed to complete any question, use comments section on the last page.
4. Print clearly; incomplete or illegible applications will not be processed.
5. This application expires 120 days from date submitted.
6. If you need help to fill out this application form or any phase of the employment process, please notify the person that gave you this form.

## APPLICANT NOTE

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of disabilities. A felony conviction will not necessarily bar an applicant from employment. Affirmative action hiring may be requested by qualified applicants. Additional testing of job-related skills may be required prior to employment. In accordance with applicable state law, a drug screen will be required prior to the final job offer and prior to reporting to work. You may be required to submit to a medical review after the job offer. Depending upon company policy and the needs of the job, you will be required to complete a medical history form and may be required to be examined by a medical professional designated by the company.

Please Print

Last Name		First		Middle	
Street Address		City		State	Zip
Home Phone			Business Phone		
Cell Phone			Email Address		
How Did You Learn About our Company?	Are You Legally Authorized to Work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/> Proof of citizenship or immigration status will be required upon employment.			Social Security Number	
Position Applied For:	Are You Employed Now? Yes <input type="checkbox"/> No <input type="checkbox"/>	Will You Work Overtime if Asked? Yes <input type="checkbox"/> No <input type="checkbox"/>		Pay Expected	
Are You on Layoff and Subject to Recall? Yes <input type="checkbox"/> No <input type="checkbox"/>	Date Available for Work		Can You Travel if job Requires? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Have you <input type="checkbox"/> Worked (or) <input type="checkbox"/> Applied with us Before?		If yes, give date:	Month	Year	
		Location	Supervisor		
Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, explain _____					

**NOTE: Do not fill out any part of this section you believe to be non-job related.**

List languages in which you are fluent

Yes  No

If the job requires, do you have the appropriate valid driver's license?

DL# \_\_\_\_\_

Type \_\_\_\_\_

State of Issue \_\_\_\_\_

Yes  No

Have you had any moving violations? Please describe \_\_\_\_\_

Yes  No

Have you been given a job description or had the requirements of the job explained to you?

Yes  No

Do you understand these requirements?

Yes  No

Can you perform the essential functions of the job for which you are applying?

Please list any other skills, licenses or certificates that may be job-related or that you feel would be of value to this job or company: \_\_\_\_\_

## EDUCATION

School	Name and Location of School	Course of Study	Years Completed	Did You Graduate?	Degree/ Diploma
High School				Yes <input type="checkbox"/> No <input type="checkbox"/>	
College/University				Yes <input type="checkbox"/> No <input type="checkbox"/>	
Other				Yes <input type="checkbox"/> No <input type="checkbox"/>	

# EMPLOYMENT REFERENCES

Your application will not be completed unless every question in this section is answered. Since we will make every effort to contact previous employers, the correct telephone numbers of past employers is critical.

<b>MOST RECENT EMPLOYER</b>	Are you currently working for this employer? YES _____ NO _____				
<b>MOST RECENT EMPLOYER</b>	May We Contact Employers? YES _____ NO _____				
Company Name	City	State	Phone Number		
Dates Employed: From To		Job Title		Supervisor	
Duties:					
Salary \$ Per <small>(Hour, Week, Month)</small> Per Diem \$ Other Compensation \$	Reason for Leaving				
<b>SECOND MOST RECENT EMPLOYER</b>					
Company Name	City	State	Phone Number		
Dates Employed: From To		Job Title		Supervisor	
Duties:					
Salary \$ Per <small>(Hour, Week, Month)</small> Per Diem \$ Other Compensation \$	Reason for Leaving				
<b>THIRD MOST RECENT EMPLOYER</b>					
Company Name	City	State	Phone Number		
Dates Employed: From To		Job Title		Supervisor	
Duties:					
Salary \$ Per <small>(Hour, Week, Month)</small> Per Diem \$ Other Compensation \$	Reason for Leaving				
<b>SKILLS ASSESSMENT-INDICATE YEARS OF EXPERIENCE FOR ALL THAT APPLY AND HIGHEST CAPACITY IN WHICH EMPLOYED BY ENTERING THE FOLLOWING IN THE CAPACITY COLUMN:</b>					
<b>LEADMAN, FOREMAN, JOURNEYMAN, GENERAL FOREMAN, SUPERINTENDENT, OR LABORER/HELPER</b>					
<b>SKILLS</b>	<b>YEARS</b>	<b>CAPACITY</b>	<b>SKILLS</b>	<b>YEARS</b>	<b>CAPACITY</b>
Build Wood Forms			Concrete Pile		
Assemble Metal Forms			Structural Welding		
Finish Carpentry			Wire Feed Welding		
Lay Block			GTAW Pipe Welding		
Lay Brick			Inner Shield Welding		
Place Concrete			Dual Shield Welding		
Finish Concrete			Mig Welding		
Set Pre-Cast Concrete			Tig Welding		
Operate Power Trowel			Oxy/Acetylene Burning		
Layout Steel			Air Arc/Plasma Arc		
Set Steel			Fit Carbon Pipe		
Tie Rebar			Fit Welded Stainless Steel Pipe		

SKILLS	YEARS	CAPACITY	SKILLS	YEARS	CAPACITY
Light Rigging (2 tons)			Clerical Skills		
Heavy Rigging (2 tons)			Electrical Termination		
Drive H-Pipe			Fit Threaded Pipe		
Sheet Pile			Fit Plastic Pipe		
Operate CNC Machining Center or Lathe			Operate Horizontal Boring Mill		
Operate Lathe/Bridgeport			Install PLC		
Lay Underground Pipe			Bull Dozer (Small & Medium)		
Expand Boiler Tubes			Bulldozer (D7 or Larger)		
Steel Fabrication			Motor Grader Operator		
Heavy Equipment Repair			Air hand Tools		
Diesel Engine Repair			Hydraulic Crane		
Small Engine Repair			Conventional Crane		
Align Couplings With Dial Indicator			Maintainer		
Operate Laser Alignment Equipment			Excavator		
Install Industrial Bearings			Rubber Tired Loader		
Bend/Install Industrial Tubing			Roller, Compactor, Mixer		
Pneumatic/Hydro Calibration			Track Loader		
Run Cable Trays			Water Truck		
Install and Bend Conduit			Dozers		
Electronic Calibration			Backhoe (large)		
Hydraulic Repair			Forklift		
Industrial Painting			Aerial Lift Off Road Haul Truck, D k		
Sandblasting			Air Track/Rock Drill		
Install Drywall			Skid Steel Loader		
Blueprint Reading			Sheet Metal Fabrication		
Drafting			Operate Screed		
Personal Computer			Install Glass		
Transit			Install Electronics		
Operate Auto Level			Install Door Hardware		
Boom Truck			OTHER:		

**CHECK ALL CRAFT CATEGORIES THAT APPLY:**

<input type="checkbox"/> BOILERMAKER	<input type="checkbox"/> BRICKLAYER	<input type="checkbox"/> BURNER	<input type="checkbox"/> CONCRETE
<input type="checkbox"/> PLUMBER	<input type="checkbox"/> CRANE OPERATOR	<input type="checkbox"/> GRINDER	<input type="checkbox"/> FORMSETTER
<input type="checkbox"/> SURVEYOR		<input type="checkbox"/> MILLWRIGHT	<input type="checkbox"/> MECHANIC
<input type="checkbox"/> ELECTRICIAN	<input type="checkbox"/> FABRICATION	<input type="checkbox"/> FIREWATCH	<input type="checkbox"/> RIGGER
<input type="checkbox"/> INSTRUMENT FITTER	<input type="checkbox"/> INSULATOR	<input type="checkbox"/> IRONWATCHER	<input type="checkbox"/> TOOL MAN
<input type="checkbox"/> PAINTER	<input type="checkbox"/> PILE DRIVER	<input type="checkbox"/> PIPERFITTER	<input type="checkbox"/> FITTER
<input type="checkbox"/> PURCHASING AGENT	<input type="checkbox"/> ROD BUSTER/STEEL TIER	<input type="checkbox"/> SCHEDULING	<input type="checkbox"/> OTHER
<input type="checkbox"/> CARPENTER		<input type="checkbox"/> PIPELAYER	
<input type="checkbox"/> WELDER	<input type="checkbox"/> CLERICAL	<input type="checkbox"/> SHEETMETAL	

**TRAINING/CERTIFICATES:**

<input type="checkbox"/> MSHA	<input type="checkbox"/> PART 46	<input type="checkbox"/> PART 48	CLASS/DATE:
<input type="checkbox"/> NCCER CERTIFIED? YES _____ NO _____ CARD#: CRAFT(S):	<input type="checkbox"/> NCCCO CERTIFIED? YES _____ NO _____ CARD#: SKILL(S): EXP. DATE:	<input type="checkbox"/> STATE LICENCE HOLDER YES _____ NO _____ CARD#: STATE(S): CRAFT(S):	
<input type="checkbox"/> OSHA	CLASS/DATE:	TWIC: YES _____ NO _____ EXP. DATE:	

# REFERENCES

Include only individuals familiar with your work ability. Do not include relatives.

NAME	ADDRESS/PHONE	YEARS KNOWN	RELATIONSHIP
1.			
2.			

<b>COMMENTS/ADDITIONAL SKILLS RELATING TO JOB POSITION:</b>

### CERTIFICATION AND RELEASE

I declare that the answers given by me to the questions in this application are correct to the best of my knowledge and I understand that any misstatement, falsification, or omission of facts shall be cause for disciplinary action up to and including dismissal or rejection from employment. I authorize the company to investigate my answers to all questions in this application. I authorize any law enforcement agency or criminal history background-reporting agency to furnish information in its records about me to the Company or its agents. I further authorize the company to contact any of my previous employers, as well as reference sources, in order to verify the information that I have furnished regarding my qualifications and character. I hereby authorize all person(s) having knowledge thereof to provide such information to the company, and I hereby release from liability and agree to hold harmless any person that furnishes such information in good faith. I further agree that I will submit to a medical review after an offer of employment is made but prior to reporting to work. Additional testing of job related skills may be required prior to employment. I will submit to drug and alcohol testing upon the company's request. I authorize the company to supply my employment records in whole or in part and in confidence to any employer, insurance agency or other party with a legal and proper interest. I hereby release the company from any liability and agree to hold harmless any employee of the company who furnished such information. I understand that I must comply with the company safety rules, including the company substance abuse policy, and that failure to comply will result in disciplinary action up to and including termination. I understand and agree that my employment is on an "at will" basis and that the employment relationship may be terminated by the company, or by me, at any time for any reason, with or without cause or notice. I further understand that no exceptions to this policy will be honored or recognized unless contained in a written agreement signed by a director of the company and myself. Any verbal representations to the contrary are invalid and should not be relied upon.

I authorize the company to obtain an investigative consumer report on me, as defined by the Fair Credit Reporting Act. This report may include information pertaining to my safety and driving record. I understand that if any such inquiry is made, further information as to its nature and scope will be supplied upon written request.

I have carefully read the information on this form, I realize I had the opportunity to ask questions about it and I understand what it means.

I further acknowledge that a telephone facsimile (FAX) or photographic copy shall be as valid as the original.

Signature of Applicant (Manual Signature Required) \_\_\_\_\_ Date \_\_\_\_\_