

**ORDERS CONSTRUCTION COMPANY, INC.  
APPLICATION FOR EMPLOYMENT**

**ALCOHOL AND DRUG SCREENING POLICY STATEMENT  
FOR JOB APPLICANTS**

It is the policy of Orders Construction Company, Inc., to maintain a safe, healthy and productive work environment for all its employees; to produce quality goods and services for its customers, in an efficient manner; to maintain the integrity and security of its facilities and property, and to perform all these functions in a fashion consistent with the interests and concerns of the communities in which the company is located.

Pursuant to these goals, Orders Construction Company, Inc., requires candidates for employment to pass a drug/alcohol screening test covering illegal substances and legal substances subject to abuse.

This requires the applicant to submit a urine and/or blood specimen and to sign a consent and release statement provided by Orders Construction Company, Inc. Refusal will result in the candidate's disqualification for further employment consideration.

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**INFORMED CONSENT AND RELEASE OF LIABILITY FOR  
DRUG OR ALCOHOL TESTING**

I UNDERSTAND that according to Orders Construction Company, Inc., I am required to submit a sample of my urine and/or blood for chemical analysis.

THE PURPOSE of this analysis is to determine the absence or presence of drugs or alcohol.

I CONSENT freely and voluntarily to Orders Construction Company, Inc.'s, request for urine and/or blood specimens. I hereby release and hold harmless Orders Construction Company, Inc., and its employees and agents from any liability whatsoever arising from this request to furnish my specimens and the testing of my specimens.

\_\_\_\_\_  
Applicant/Employee

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Witness

**AUTHORIZATION FOR RELEASE OF INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, hereby authorize and direct any persons or corporations and/or any staff member of a corporation to release any information verbally or in writing regarding my employment or character to:

**ORDERS CONSTRUCTION COMPANY  
POST OFFICE BOX 1448  
ST ALBANS WV 25177**

This information is being used as background information for my employment application with Orders Construction Company, Inc.

I, the undersigned, waive any liability that may arise against any company and/or any staff member of said company or any individual for releasing said information.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

**ORDERS CONSTRUCTION COMPANY, INC.**  
**APPLICATION FOR EMPLOYMENT**

Date \_\_\_\_\_

NAME: \_\_\_\_\_  
P.O. Box or Street \_\_\_\_\_  
City, State & Zip Code \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Are you authorized to work in the United States? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
Are you under 18 years of age: \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
Position (s) Applied For (BE SPECIFIC) \_\_\_\_\_  
Have you ever applied with Orders before? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
Date Available for work: \_\_\_\_\_ Rate of Pay Expected: \_\_\_\_\_ per \_\_\_\_\_  
Is there anything that will prevent you from performing the essential functions of the position or positions for which you are applying, with or without reasonable accommodations? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
If yes, explain \_\_\_\_\_

Would you be willing to work overtime? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
Are you willing to travel overnight? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
Have you ever been convicted of a criminal offense? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
If yes, please explain: \_\_\_\_\_

**EMPLOYMENT HISTORY**

List below your present and past employment, beginning with your most recent employment.

1. Name of Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Describe the work you performed: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ per \_\_\_\_\_ Ending Pay: \_\_\_\_\_ per \_\_\_\_\_  
Period Worked: From \_\_\_\_\_ To \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_

2. Name of Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Describe the work you performed: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ per \_\_\_\_\_ Ending Pay: \_\_\_\_\_ per \_\_\_\_\_  
Period Worked: From \_\_\_\_\_ To \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_

3. Name of Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Describe the work you performed: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ per \_\_\_\_\_ Ending Pay: \_\_\_\_\_ per \_\_\_\_\_  
Period Worked: From \_\_\_\_\_ To \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_

4. Name of Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Describe the work you performed: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ per \_\_\_\_\_ Ending Pay: \_\_\_\_\_ per \_\_\_\_\_  
Period Worked: From \_\_\_\_\_ To \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_

5. Name of Company: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Describe the work you performed: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ per \_\_\_\_\_ Ending Pay: \_\_\_\_\_ per \_\_\_\_\_  
Period Worked: From \_\_\_\_\_ To \_\_\_\_\_  
Reasons for Leaving: \_\_\_\_\_

Have you ever worked under a different name for any of these employers? \_\_\_\_\_ (yes) \_\_\_\_\_ (no)  
If yes, please identify the employer and state the name: \_\_\_\_\_

## CHARACTER REFERENCES

List individuals, other than relatives, that we may contact

- |    |  |   |
|----|--|---|
| 1. | Name: _____<br>Address: _____<br>_____<br>Phone Number _____ | How long have you known this person? _____<br>How do you know this person? _____<br>_____<br>Employer/Job Title: _____/ |
| 2. | Name: _____<br>Address: _____<br>_____<br>Phone Number _____ | How long have you known this person? _____<br>How do you know this person? _____<br>_____<br>Employer/Job Title: _____/ |
| 3. | Name: _____<br>Address: _____<br>_____<br>Phone Number _____ | How long have you known this person? _____<br>How do you know this person? _____<br>_____<br>Employer/Job Title: _____/ |

## EDUCATION

Please circle the last year completed:

Elementary School	.....	5	6	7	8
High School	.....	1	2	3	4
College	.....	1	2	3	4

Describe any other training such as military, vocational, etc. \_\_\_\_\_

## APPLICANT CONSENT

Please read each of the following statements and place your *initials* by each one to indicate that you understand and agree to the terms stated, then sign this form at the bottom.

\_\_\_\_\_ The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my immediate dismissal. I further understand that this application is not, and is not intended to be a contract of employment, nor does this application obligate the company to which you are applying in any way. Furthermore, I understand that if I am hired, my employment can be terminated with or without cause at any time, at the discretion of either the company or myself.

\_\_\_\_\_ I hereby give permission to contact the previous employers and character references that I have listed in this application. I also agree not to hold any references contacted in regard to this application liable for damages relating to any information they provide to Orders Construction Company, Inc.

\_\_\_\_\_ I understand the Employer maintains a drug-free workplace. All applicants for this position must undergo a pre-employment drug screening. All applicants testing positive for illegal substances will be disqualified from consideration. Upon hire, I will be expected to abide by the company's drug testing policy. I further voluntarily agree to be drug tested by Orders Construction Company, Inc., if requested.

\_\_\_\_\_ I understand that by filling out this application that I will not be guaranteed a job. I also understand that this application will only be considered for thirty (30) days unless I contact the Personnel Director in writing by certified mail on a continuous basis that I am still available for employment.

Signature \_\_\_\_\_

Date: \_\_\_\_\_

# APPLICANT DATA RECORD

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap, or any other legally protected status.

As employers/governmental contractors, we comply with government regulations including affirmative action responsibilities where they apply.

Solely to help us comply with government record keeping, reporting and, other legal requirements, we request that you please fill out the Applicant Data Record. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a Confidential File separate from the Application for Employment, **YOUR COOPERATION IS VOLUNTARY.**

(PLEASE PRINT)

Date \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source:  Advertisement     Friend     Relative     Walk-In  
 Employment Agency     Other \_\_\_\_\_

Name	LAST	FIRST	MIDDLE	Phone (____)	AREA CODE	PHONE NUMBER
Address	NUMBER	STREET	CITY	STATE	ZIP CODE	

**VOLUNTARY SURVEY**

Government agencies at times require periodic reports on the sex, ethnic, handicapped, veterans, and other preferred status of applicants. This data is for analysis and possible affirmative action only. **SUBMISSION OF INFORMATION IS VOLUNTARY.**

Check One:  Male     Female

Check one of the following:  
 Race/Ethnic Group:

White     Black     Hispanic     American Indian/Alaskan Native     Asian/Pacific Islands

If you are a veteran, please supply the following information:

- Disabled Veteran
- Recently Separated Veteran, \_\_\_\_\_ Service Dates
- Veteran With Service Medal or Campaign Badge, \_\_\_\_\_ Service Dates,  
 \_\_\_\_\_ Name of War or Military Campaign, Expedition, or Operation

If you have a disability that requires accommodation to perform this position, please explain what accommodations would allow you to handle this job successfully: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_