



8901 Quality Road
Bonita Springs, FL 34135

Phone: (888) 742-RICE
(239) 495-0344

Fax: (239) 495-1156

Web: www.RiceInsulation.com

Last Name _____

Date _____

First Name _____

Qualifications for Employment

- ❖ Must Be At Least 18 Years of Age
- ❖ Must Pass Drug Testing
**RICE INC. is a Drug-Free Workplace.
- ❖ Must Have Clean Driving Record (if applicable)
- ❖ Must Be Able to Lift up to 50 lbs
- ❖ Will Be Required to Work Some Saturdays
- ❖ Will Be Required to Work at Various Heights
- ❖ Will Be Required to Wear the Appropriate Safety Equipment (i.e. Gloves, long pants, hard sole shoes, safety glasses, safety belts, hard hats, etc.)
** RICE INC. is an OSHA Compliant Workplace.
- ❖ Physical exam may be required for certain job types or special circumstances

Home Phone () _____

PLEASE NOTE: It is the policy of RICE INC. to verify the Social Security Number of all new hires on the first day of employment.

JOB APPLICATION - ENGLISH



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Application for Employment

Instructions: Complete all necessary information. You may be asked to provide additional information on another form. This application will be kept on file. It is to your advantage to periodically check to keep it current and active. Be sure to sign and date the application. **Please print.**

Name _____

Phone _____ Social Security Number _____

Address _____

City/State/ZIP _____

Position applied for _____ Referred By _____

Special training or skills that would benefit you in the job for which you are applying: _____

On what date would you be available for work? _____

Have you ever been employed here before? No Yes Dates _____

Do you have a legal right to be employed in the U.S.? Yes (If yes, proof is required.) No

Are you at least 18 years of age? Yes No

Have you ever been convicted of a felony? Yes No

U.S. Military or Naval Service _____ Rank _____

Present Membership in National Guard or Reserves _____

Educational Background

High School:

Name and location _____ Did you graduate? Yes No

College:

Name and location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

Vocational, or other, training

Name and location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

Continuing Education: _____

Previous Employers and Addresses

Place an by the employer(s) you do not want us to contact. List the most recent employer first

1. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From _____ To _____

Position _____ Reason for Leaving _____ Last Wage _____

2. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From _____ To _____

Position _____ Reason for Leaving _____ Last Wage _____

3. Company Name _____ Phone () _____

Contact Name _____

Address _____ Employed From _____ To _____

Position _____ Reason for Leaving _____ Last Wage _____

Give the names of three (3) persons not related to you, whom you have known for at least one year.

1. Name _____ Address _____

Phone () _____ Business _____ Years Known _____

2. Name _____ Address _____

Phone () _____ Business _____ Years Known _____

3. Name _____ Address _____

Phone () _____ Business _____ Years Known _____

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANYS RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANYS OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

Applicant's Signature _____ Date _____

Applicant Background Check Authorization

Name of Job Applicant / Employee (PLEASE PRINT)

Driver's License #

Exp. Date

State (if not Florida)

Date

I hereby acknowledge that various consumer reports may be obtained as part of Rice Insulation & Glass, Inc.'s evaluation of my job application and/or employment. The reports may include my driving record as well as an assessment of my insurability under the Company's insurance coverages. It is the policy of Rice Insulation & Glass, Inc. to verify the employment information provided by an applicant on his/her job application, check Workers' Compensation history as allowed by law, and perform a criminal background check. If an applicant is accepted for employment, some screening takes place after the date of hire, including verification of a valid social security number.

By signing this disclosure, I hereby authorize the Company and/or the Company's Insurance Carrier/Broker to procure such reports and additional reports about me from time to time, as it deems appropriate, to evaluate my insurability, my eligibility for employment according to company standards, or for other permissible purposes.

Sincerely,

Signature of Job Applicant / Employee

Date

Signature of Witness (Company Representative)

Date

Name of Witness (PLEASE PRINT)