

# EMPLOYMENT APPLICATION



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REMA TIP TOP/North America, Inc., is an equal opportunity employer. Qualified applicants are considered for all positions without regard to race, religion, sex, national origin, age, disability (that can be reasonably accommodated without undue hardship), veteran status, or any other category protected by applicable federal, state or local laws.

Date of Application: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Position Applied For: \_\_\_\_\_ Date You Can Start Work: \_\_\_\_\_

Desired Salary / Hourly Rate \$ \_\_\_\_\_ How were you referred? \_\_\_\_\_

## EMPLOYMENT HISTORY

Employer: \_\_\_\_\_ May we contact? Yes No  
Address: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates: \_\_\_\_\_ To: \_\_\_\_\_  
Supervisor: \_\_\_\_\_

Employer: \_\_\_\_\_ May we contact? Yes No  
Address: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates: \_\_\_\_\_ To: \_\_\_\_\_  
Supervisor: \_\_\_\_\_

Employer: \_\_\_\_\_ May we contact? Yes No  
Address: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_  
Position: \_\_\_\_\_  
Dates: \_\_\_\_\_ To: \_\_\_\_\_  
Supervisor: \_\_\_\_\_

## REFERENCES

	Name:	Relationship	Phone Number	Years Known
1.				
2.				
3.				



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**EDUCATION**

School	Name and Address	# of Years Complete	Did You Graduate?	Degree Received
High School				
College				
Trade				

Please list any training completed / professional certifications (i.e. OSHA-10, OSHA-30, MSHA, Equipment Operated):

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**BACKGROUND INFORMATION**

Have you ever been employed with us in the past?    YES    NO

If yes, list dates of employment, position and location: \_\_\_\_\_

Are you at least 18 years of age?    YES    NO

**DRIVING INFORMATION:** If it is necessary for you to use your personal or company vehicle for business purposes, please complete the following:

Do you have a current valid driver's license?    YES    NO

Do you have a current valid commercial driver's license (CDL)    YES    NO                      Class (Check One):    A    B    C

**CERTIFICATION**

I certify that all of the information furnished in this application (and accompanying documents, if any) is true, complete and correct. I understand and agree that any falsification, misrepresentation, misleading statements or omission of fact on either this application or during the pre-hire process will be sufficient reason for disqualification from further consideration or for termination of employment.

To the extent permitted by law, REMA TIP TOP / North America, Inc., may conduct, or have a third party conduct, a background investigation. Criminal convictions will not necessarily disqualify you from employment. Factors such as job responsibilities, the age and time of the offense, the seriousness and nature of the violation, and rehabilitation will be considered when making any employment decision. An offer of employment, or subsequent employment, is conditioned upon the company's satisfaction with the results of such investigation. Additionally, some customers require specific background reviews of our employees and those employees who fail to meet that criteria are not permitted to work at those customer sites.

REMA TIP TOP / NORTH AMERICA, INC., IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

APPLICANT SIGNATURE: \_\_\_\_\_                      DATE: \_\_\_\_\_


Please sign this form digitally. If you cannot sign it digitally, then print, sign it, and scan the form. Instructions how to sign a pdf are on the next page.

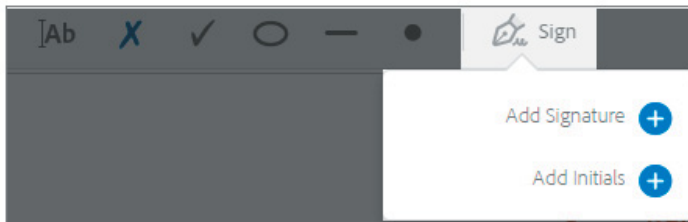
Email signed application to: [sjoyce@rematip.com](mailto:sjoyce@rematip.com)

Please make sure that the newest version of Adobe Reader DC or Adobe Acrobat is installed on your computer.

## How to sign your form

To sign a PDF form, you can type, draw, or insert an image of your handwritten signature or initials.

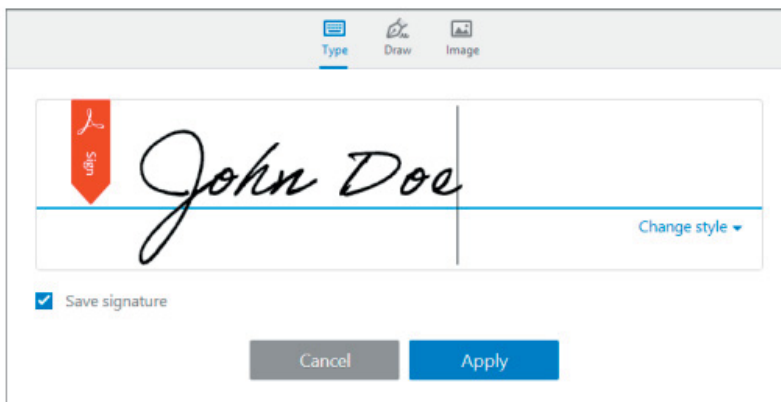
- 1 Open the PDF document or form in Acrobat or Reader, and click **Fill & Sign** in the right pane.
- 2 Click the **Sign** icon  in the Fill & Sign toolbar, and then choose whether you want to add your signature or just initials.



If you have already added signatures or initials, they are displayed as options to choose from.

- 3 If you've already added your signature or initials, just select it from the Sign options, and then click at the place in the PDF where you want to add your signature. Skip to the next step.

If you are signing for the first time, you see the Signature or Initials panel. Below is an example of the Signature panel.



You can choose to type, draw, or import a signature image. Added signatures and initials are saved for future use.

- **Type:** Type your name in the field. You can choose from a small selection of signature styles; click **Change Style** to view a different style.
- **Draw:** Draw your signature in the field.
- **Image:** Browse and select an image of your signature.
- **Save Signature:** When this check box is selected, and you're signed in to Acrobat Reader or Acrobat, the added signature is saved securely in Adobe Document Cloud for reuse.

Click **Apply**, and then click at the place in the PDF where you want to place the signature or initial.

- 4 To move the placed signature or initial, click the field to highlight it and then use the arrow keys. To resize or delete the field, use the options in field toolbar.