

## **EMPLOYMENT APPLICATION**

Please submit application online at www.utilitypipelineltd.com/careers or mail to 4100 Holiday Street NW Suite 201, Canton, Ohio 44718

PERSONAL INFORMATION					TODAY'S DATE	
FULL NAME						
ADDRESS						
СІТУ			STATE		ZIP CODE	
EMAIL				PHONE		
HOW DID YOU HEAR ABOUT US?			DO YOU KNOW ANYONE WHO WORKS HERE?			
EMPLOYMENT DESIRED		POSITION DESIRED				
☐ FULL-TIME ☐ PART-TIME ☐ SEASONAL	☐ INTERN					
AVAILABLE START DATE	DESIRED PAY		□ HOURLY □ SALARY			
EMPLOYMENT ELIC	CIBILITY					
employed in the United  ARE YOU CAPABLE OF PERFORMING THE verify the status of every in		d in the United S status of every ind	employers hire only individuals who are authorized to be lawfully States. In compliance with these laws, Utility Pipeline Ltd. will dividual offered employment with the Company. In this connection,			
ESSENTIAL FUNCTIONS OF THE JOB YOU ARE APPLYING FOR WITH OR WITHOUT A REASONABLE ACCOMMODATION?	authoriza	all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.				
EDUCATION						
NAME AND ADDRESS OF SCHOOL	MAJOR / SUBJECT STUDIED		DID YO GRADUA	TVDEO	F DEGREE OR DIPLOMA	
HIGH SCHOOL						
COLLEGE						
COLLEGE OR GRADUATE						
OTHER						

WORK EXPERIENCE					
COMPANY NAME	JOB TITLE				
STREET ADDRESS					
СІТУ	STATE		ZIP CODE		
SUPERVISOR'S NAME	l	PHONE NUMBER			
START DATE  Month  Year  Month  Year	TERMINATION  UVOLUNTARY INVOLUNTARY				
REASON FOR LEAVING BRIEFLY DESCRIBE YOUR MAJOR DUTIES					
COMPANY NAME	JOB TITLE	JOB TITLE			
STREET ADDRESS					
СІТУ	STATE		ZIP CODE		
SUPERVISOR'S NAME		PHONE NUMBER			
START DATE END DATE	TERMINATION				
REASON FOR LEAVING  BRIEFLY DESCRIB					
BRIEFLY DESCRIBI	E YOUR MAJOR DUTIE				
COMPANY NAME	JOB TITLE				
STREET ADDRESS					
СІТУ	STATE		ZIP CODE		
SUPERVISOR'S NAME		PHONE NUMBER			
START DATE  Month  Year  END DATE  Month  Year	TERMINATION  UVOLUNTARY II	NVOLUNTARY			
	E YOUR MAJOR DUTIE	es .			
EMPLOYMENT ELIGIBILITY					
IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK AND DRUG TEST?					

REFERENCES PLEASE PROVIDE THREE (3) PROFESSIONAL REFERENCES						
FULL NAME	RELATIONSHIP	COMPANY	PHONE/EMAIL			

## **DISCLAIMER**

## PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

**References:** I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

**Temporary/Contract Employment:** If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNATURE	DATE
X	//

