

# Maximum Building Systems Inc. Employment Application Form

Maximum Building Systems Inc. is an equal employment opportunity employer.

**PLEASE PRINT ALL INFORMATION REQUESTED**  
**APPLICANTS WILL BE TESTED FOR ILLEGAL DRUGS**

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

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

List your present address \_\_\_\_\_  
Number Street City State Zip

How long \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Position applied for \_\_\_\_\_

Salary desired \_\_\_\_\_

Do you have a valid driver's license? \_\_\_\_\_ Do you have your own transportation? \_\_\_\_\_

How many hours can you work weekly? \_\_\_\_\_

Employment desired \_\_\_\_\_ FULL-TIME \_\_\_\_\_ PART-TIME \_\_\_\_\_ FULL- OR PART-TIME

When available for work ? \_\_\_\_\_

Please list any special training you have received \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?	_____ Yes	_____ No
Are you currently on probation as a result of previous arrest(s)?	_____ Yes	_____ No
Have you had any accidents during the past three years?	_____ Yes	How many? _____
Have you had any moving violations during the past three years?	_____ Yes	How Many? _____

Please list two references other than relatives or previous employers.

Name \_\_\_\_\_ Name \_\_\_\_\_

Company \_\_\_\_\_ Company \_\_\_\_\_

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

Telephone ( ) \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

**Work Experience**

Please list your work experience for your last 2 employments beginning with your most recent job held.  
If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of employer	_____	
Address	_____	
City, State, Zip Code	_____	
Phone number	_____	
Name of last supervisor	_____	
Employment dates	From _____	To _____
Pay or Salary	Start _____	Final _____
Your last job title	_____	
Reason for leaving (be specific)	_____	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.	_____	
	_____	
	_____	
	_____	

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City, State, Zip Code	_____	
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Reason for leaving (be specific)	_____	
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Reason for leaving (be specific)	_____	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.	_____	
	_____	
	_____	
	_____	

May we contact your present employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Did you complete this application yourself \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, who did? \_\_\_\_\_

## You must sign & date application at bottom of pages 3 & 4

### APPLICATION FORM WAIVER

In exchange for the consideration of my job application by Maximum Building Systems Inc.(hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Maximum Building Systems Inc., or otherwise to change in any respect the Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Maximum Building Systems Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and Maximum Building Systems Inc. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_

**Please be informed that per the Florida Department of Revenue Unemployment Compensation :  
A claimant may be disqualified because of the reasons for separation from work. The facts  
pertaining to the circumstances causing the separation must be clearly established. The  
following may disqualify an individual from receiving benefits:**

1. Voluntarily quit without good cause attributable to the employing unit.
2. Suspended or discharged for misconduct connected with work. Misconduct (as defined in Chapter 443, F.S.) includes, but is not limited to:
  - Conduct showing such willful or wanton disregard of an employer's interest as is found in deliberate violation or disregard of standards of behavior which the employer has the right to expect of the employee.
  - Carelessness or negligence of such a degree or recurrence as to manifest guilt, wrongful intent or evil design, or to show an intentional and substantial disregard of the employer's interest or of the employee's duties and obligations to the employer.
3. Suspended or discharged for misconduct connected with work consisting of drug use as evidenced by a positive, confirmed drug test.
4. Failed without good cause either to apply for available suitable work or to accept suitable work or to return to customary self-employment when so directed by AWI.
5. Unemployed due to a labor dispute (which may involve a strike or lockout) in active progress in active progress which exists at the place of employment place of employment; and the individual is participating in such labor dispute. In some cases, unemployment due to a lockout may not be disqualifying.
6. Furnished false information or fraudulent representation for the purpose of obtaining benefits such as not reporting earnings or job refusals. Willful misrepresentation is also cause for fine and imprisonment.
7. Receiving a retirement income from a base period employer.
8. Receiving or seeking unemployment benefits under an unemployment compensation law of another state or the United States, unless the appropriate agency of such state or of the United States finally determines that the individual is not entitled to such unemployment benefits.
9. Alien, unless such alien has been lawfully admitted for permanent residence or otherwise is permanently residing in the United States under appearance of law (including an alien who is lawfully present in the United States as a result of the provisions of the Immigration and Nationality Act).
10. Terminated from employment for violation of any criminal law punishable by imprisonment or for any dishonest act in connection with the individual's employment.

Signature of applicant \_\_\_\_\_ Date: \_\_\_\_\_