

Internal Use Only:
Job Offer Date: _____
Job Offer By: _____
Start Date: _____

BARTOW PRECAST, INC.
APLICACION DE EMPLEO

En el cumplimiento de las leyes de igualdad en la oportunidad de empleo federales y estatales, los aplicantes calificados serán considerados para las posiciones vacantes sin importar raza, color, religion, sexo, nacionalidad, edad, estado marital, estado veterano, discapacidad que no es en relación con el trabajo, o cualquier otro grupo protegido.

Nombre del Apicante: _____ Fecha: _____
(Nombres) (Apellidos)

Seguro Social #: _____ Posición a la que aplica: _____

Dirección: _____ Desde cuándo: _____
(Calle) (Ciudad) (Estado y código postal)

Dirección de Correo Postal (si es difiere con la dirección de la residencia): _____

Telefono# _____ Correo electrónico: _____

EDUCACION

Nivel de Escuela: _____

Nombre de Escuela: _____

Ciudad/Estado: _____ Área de Estudio o diplomado: _____

**MENCIONA HABILIDADES CON MAQUINARIA, EQUIPO, CURSOS, CONOCIMIENTOS
ADICIONALES O CLASES QUE SEAN RELEVANTES PARA LA POSICIÓN A LA CUAL
APLICA:**

HISTORIAL DE EMPLEO

Deben incluir dirección completa y número de teléfono. No se considerarán aquellos candidatos cuyo historial de empleo no se pueda verificar. Enliste sus empleadores en orden inverso, es decir empezando por el más reciente, si hay tiempo entre los trabajos donde no se trabajo deberá explicar el motivo.

Nombre del Empleador: _____ Teléfono: _____

Contacto: _____ correo electrónico: _____

Puesto: _____ Desde: _____ Hasta: _____

Responsabilidades: _____

Razones de retiro: _____

Nombre del Empleador: _____ Teléfono: _____

Contacto: _____ correo electrónico: _____

Puesto: _____ Desde: _____ Hasta: _____

Responsabilidades: _____

Razones de retiro: _____

Nombre del Empleador: _____ Teléfono: _____

Contacto: _____ correo electrónico: _____

Puesto: _____ Desde: _____ Hasta: _____

Responsabilidades: _____

Razones de retiro: _____

Ha servido en las fuerzas armadas de EE.UU.? SI ___ No ___ Sirviendo actualmente ___

EXISTE ALGUNA RAZÓN POR LA CUAL USTED SERÍA INCAPAZ DE
REALIZAR EL TRABAJO QUE ESTÁ SOLICITANDO? SI ___ NO ___

Si su respuesta es afirmativa por favor explique:

Es usted mayor de 18? Si ___ No ___ Si su respuesta es no, puede comprobar su edad?
Si ___ No ___

TIENE USTED DERECHO LEGAL DE TRABAJAR EN LOS ESTADOS UNIDOS?
SI ___ NO ___

BARTOW PRECAST, INC. ES UN LUGAR DE TRABAJO LIBRE DE DROGAS
CERTIFICADA. SI ES CONTRATADO, ESTA DISPUESTO A SOMETERSE A PASAR UNA
PRUEBA DE SUSTANCIAS? SI ___ NO ___

PARA SER LEÍDO Y FIRMADO POR EL ASPIRANTE

Autorizo a BARTOW PRECAST, INC. para hacer tales investigaciones y consultas de mi persona, empleo, financieras y otras cuestiones en relación que sean necesarias para llegar a una decisión de empleo. Por la presente libero a los empleadores, escuelas y otras personas de toda responsabilidad en responder a las preguntas y compartir información con respecto a mi solicitud de empleo. En caso de empleo, entiendo que la información falsa o engañosa proporcionada en mi solicitud o entrevista(s) puede resultar en el despido. Entiendo que estoy obligado a cumplir con todas las normas y reglamentos de la Compañía. También certifico que he completado esta solicitud y que todas las entradas de información que contiene son verdaderas y completas según mi leal saber y entender.

FIRMA: _____ **FECHA:** _____

BARTOW PRECAST, INC.
Formulario de consentimiento de prueba de drogas
y liberación de resultados previos al empleo

Por medio de la presente doy mi consentimiento para someterme al análisis de orina y/u otras pruebas según lo determine BARTOW PRECAST, INC. en el proceso de selección de solicitantes de empleo, con el fin de determinar el contenido de drogas en los mismos.

Acepto que la compañía Cartersville U&I, Inc. (u otra empresa contratada por la Compañía) puede recolectar estas muestras para estas pruebas y puede analizarlas o enviarlas a un laboratorio de pruebas para su análisis.

Además, por medio de la presente acepto y autorizo la divulgación de los resultados de dichas pruebas a la Compañía.

Entiendo que el uso actual de drogas ilegales es lo que me prohibiría trabajar en esta Compañía.

Además, acepto mantener indemne a la Compañía y a sus agentes (incluido el médico o la clínica antes mencionados) de cualquier responsabilidad total o parcialmente que surja de la recolección de muestras, las pruebas y el uso de la información de dichas pruebas en relación con la consideración de la Compañía y mi solicitud de empleo.

Además, acepto que una copia reproducida de este Formulario de autorización y consentimiento previo al empleo tendrá la misma fuerza y efecto que el documento original.

He leído cuidadosamente lo que antecede y entiendo completamente su contenido. Reconozco que mi firma de este Formulario de consentimiento y divulgación es un acto voluntario de mi parte y que nadie me ha obligado a firmar este documento.

APLICANTE:

Nombre en letra molde: _____ S.S. #: _____

Firma: _____ Fecha: _____

TESTIGO:

Nombre en letra molde: _____

Firma: _____

Company Name:_____

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Employer (the “Company”) may obtain a consumer report about you from a consumer reporting agency for employment purposes (including contract or volunteer services) and if you are hired, or if you already work for the Company, may obtain additional consumer reports on you for employment purposes.

The Company may order an “investigative consumer report.” Such reports typically include information from personal interviews, most commonly from an applicant’s prior employers and references.

The report may include information about your character, general reputation, personal characteristics, and/or mode of living. Information may be obtained from private and public record sources. These reports may contain information regarding your criminal history, social security verification, motor vehicle records (‘driving records’), credit reports, verification of your education or employment history (including income), or other background checks.

You have the right to request more information about the nature and scope of a consumer report, if any, by contacting Professional Screening & Information, Inc., P.O. Box 644, Rome, Georgia 30162 by calling them collect at 1-877-235-7574, or contacting them via the internet at www.psibackgroundcheck.com.

A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer’s credit file. Upon seeing a fraud alert display on a consumer’s credit file, a business is required to take steps to verify the consumer’s identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may

have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

FOR QUESTIONS OR CONCERNS REGARDING:	PLEASE CONTACT:
1. a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates. b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20006 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air Carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

Questions and/or consumer referrals may be made to:

Professional Screening & Information, Inc, Post Office Box 644 Rome, Georgia 30162 Telephone (toll free): 706-235-7574 OR 1-877-235-7574

Thank you for allowing us the opportunity to serve as your background investigation provider.

CONSUMER REPORT AUTHORIZATION

The company with whom You have applied (the "Company") intends to procure one or more consumer reports, or investigative consumer reports, about You in connection with your application for employment and requires your consent in order to do so.

By signing below, you acknowledge and affirm as follows:

I hereby authorize the Company to procure one or more consumer reports, and/or investigative consumer reports, which may include criminal background history, about me to be used for employment purposes at any time after receipt of this authorization and, if I am hired, throughout my employment as allowed by law.

To that end, I hereby authorize, as allowed by law, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer or insurance company to furnish any and all background information requested by Professional Screening & Information, Inc., another outside organization acting on behalf of Company and/or Company itself.

I agree that this Consumer Report Authorization in its original, faxed, photocopied, or electronic form will be valid for any consumer reports or investigative consumer reports that may be requested about me on behalf of the Company.

I understand that my driving record may be used to verify my identity and/or my ability to drive legally and safely. If driving a company vehicle (or my own vehicle) is a requirement of the position I am being considered for, then having and maintaining a satisfactory driving record and being able to legally and safely drive as required by my employer is a condition of my employment. If applicable, I agree to allow the Company to check my driving record, which may contain information about my physical, mental, or behavioral health maintained by a state government agency that has restricted by ability to drive legally, prior to hire and periodically thereafter.

I acknowledge receipt of the following documents: "Disclosure Regarding Background Investigation", "State Disclosures", and "A Summary of Your Rights Under the Fair Credit Reporting Act".

I understand I have the following rights in connection with this Authorization: You have the right, upon written request made within a reasonable time after receipt of this notice to ask the Company to disclose the nature and scope of any consumer report. You may also request a copy of that report from the Company. You may also request a copy from Professional Screening & Information, Inc., P.O. Box 644, Rome, Georgia 30162 by calling them collect at 1-877-235-7574, or contacting them via the internet at www.psibackgroundcheck.com. If anyone other than Professional Screening & information, Inc. provides an investigative consumer report about you, the Company will provide you with their relevant contact information within five days of your request.

BY SIGNING BELOW, I AFFIRM THAT EACH OF THE ABOVE IS TRUE AND CORRECT:

NAME

DATE

THE INFORMATION BEING REQUESTED BELOW IS FOR BACKGROUND INVESTIGATION PURPOSES ONLY AND WILL NOT BE USED FOR ANY OTHER PURPOSE.

PLEASE PRINT

Full Legal Name (as shown on SSN / ID card):

First: _____ Middle: _____ Last: _____

Additional Name: (First, Middle Last): _____ Dates Used (from-to): _____

Social Security Number: _____ - _____ - _____ Date of Birth (month-day-yr): _____ - _____ - _____

Driver's License Number: _____ State: _____

Cell #: _____ Home #: _____

E-mail Address: _____

Position Applied For: _____

Current Address:

Month / Year

• Street: _____ From: _____
City, State, County, Zip: _____ To: _____

Chronologically list ALL places of residence for the past seven years:

• Street: _____ From: _____
City, State, County, Zip: _____ To: _____

• Street: _____ From: _____
City, State, County, Zip: _____ To: _____

• Street: _____ From: _____
City, State, County, Zip: _____ To: _____

COMPANY USE ONLY

Client: Bartow Precast, Inc.

Location: _____

Note: ✓ **PLEASE NOTE:** For all Motor Vehicle Reports, a clear and legible copy of the applicant's driver's license is required.