

# **ONBOARDING DOCUMENTS**

<b>Employee Data:</b>								
Name:						S	ocial Securit (last 4 or	•
							XXX-XX	
First		Middle		Last				
Home Address:								
	Street	Cit	ty	State		Zi	p Code	
Date of Birth:	Home Phone	Number:	Cell Phone:			Personal en	nail:	
Will you be driving fo	or the company:	Yes No	CDL Driver:	Yes	No	Rehire:	Yes	No
Date Completed:			Signature:				_	



# **EMPLOYMENT APPLICATION**

Alamo1 is an Equal Opportunity Employer and is committed to the goals of equal opportunity and does not unlawfully discriminate in hiring and employment practices because of race, color, religion, gender, pregnancy, creed, sex, age, national origin, marital status, veteran status, the presence of a non-job-related medical condition or disability. No question on this application is intended to secure information which could be of discriminatory nature.

INSTRUCTIONS: Consider each question carefully and give as much detail as possible. Failure to do this will result in delay or possible rejection of the application. It is our practice to verify information given by applicants.

	NAME OF SCHO	OL OR	LOG	CATION		N	umber of Years	Did yo		jor Course Study or
*Noting a prior convid	tion is not an automa	tic exclusion fi	rom being	hired. Each	case is consi	dered sep	parately based	on job requirer	ments.	
	convicted of a felony, to either question, ple									No 🗆
Name of Immediate F	Relative(s) employed	by Alamo1:								
Have you applied for reason for leaving:	or worked with Alamo	o1 previously?		Yes	No	If	so, list the date	es, position, an	d supervisor a	nd
Who referred you to	Alamo1?									
Have you ever been Can you travel if the j	bonded? lob requires it?	Yes Yes	No No		Are you cu Are you le	•		he United State	es?	Yes Yes
Minimum Salary Req	uired: \$									
Specific Position for V	Which You Are Applyi	ng:								
_	No. and St	reet	City	State	Zip Code	_	Month/Year	to	Month/Year	
Previous Address:						From:	1		/	
Previous Address: _	No. and Str	eet	City	State	Zip Code	From:	/ Month/Year	to	/ Month/Yea	r
	ived at this address?	•	_years	monu						
Hawleng baye year						City		State	Zip C	oue
Current Home Addre	ss:No. and	1 Stroot				City		State	Zip C	'odo
-		(List 7 yea	rs of resid	lential history	<ul> <li>use separa</li> </ul>	te sheet,	if necessary)			
List all other names circumstances:	(maiden name, nickna	ame, etc.) you	have use	d in the past	for work, scho	ool or for	any other reas	ons? Provide n	ame(s), dates	used and
Email Address:										
Name:Last	Fii	rst	N	1iddle	nome/	Jeli Num	Der:	Include area c	ode	
					11	O - II NI	l			
Date:										

NAME	NAME OF SCHOOL OR COLLEGE	LOCATION (City and State)	Number of Years Completed	Did you Graduate?	Major Course of Study or Degree
High School				Yes □ No □	
College/					
University				Yes □ No □	
Other				Yes □ No □	
				l v	
Other				Yes □ No □	

Present/Last Employer:		Your Name While Employed	
	)		
upervisor Name and Title:		Telephone No	
tart Date (Month/Year):	End Date (Month/Year):	Final Rate of Pay: \$	per
osition you Held:	Reaso	on for Leaving:	
May we contact your current employer?	Yes  No		
, , , , , , , , , , , , , , , , , , , ,	766 E 116 E	Your Name While Employed	
•	& Zip Code)	Telephone No.	
•		Final Rate of Pay: \$p	
		ring:	
Previous Employer		Your Name While Employed	
. ,			
		Telephone No.	
		Final Rate of Pay: \$	
otart Date (Monthly Feat)	Liid Date (MOIIII) I cai j.	i παι ιναίο σι Γαу. φ	ρει
Position you Held:	Reasor	n for Leaving:	
lature of Work Performed:			
Previous Employer:		Your Name While Employed	
Address: (Street, City, State & Zip Code)			
Supervisor Name and Title:		Telephone No.	
		Final Rate of Pay: \$	
		n for Leaving:	
Nature of Work Ferrormed.			
Previous Employer:		Your Name While Employed	
Address: (Street, City, State & Zip Code)			
		Telephone No.	
Start Date (Month/Year):	End Date:		per
Position you Held:	Reaso	on for Looving:	
Nature of Work Performed:	<u> </u>	in tol Leaving.	
_	d to resign by any employer? Yes   No		
f yes, please explain, including employer	r(s), date(s) and circumstances:		
	wish us to contact		
		vith Alamo1	
Describe the skills and aptitudes you poss	sess that would qualify you for a position w		
Describe the skills and aptitudes you poss	sess that would qualify you for a position w	ing to include technology/computer skills:	
escribe the skills and aptitudes you poss summarize briefly other experience or o	sess that would qualify you for a position w qualification for the position you are seeki		
describe the skills and aptitudes you possible the skills and aptitudes you possible the strength of the stren	sess that would qualify you for a position w		_ Foreign Languages
Describe the skills and aptitudes you poss Summarize briefly other experience or of	sess that would qualify you for a position w qualification for the position you are seeki cations required for the position which you ation, number and expiration date:	are applying? Yes □ No □  (Please Circle)	Fluency Level
Summarize briefly other experience or	sess that would qualify you for a position w qualification for the position you are seeki cations required for the position which you ation, number and expiration date:	are applying? Yes □ No □	

REFERENCES
List at least three business references, supervisors (not relatives or friends) who can attest to your experience and or qualifications.  NAME & TITLE OF SUPERVISOR  COMPANY ADDRESS (Street, City, & State)  TELEPHONE NUMBER w/Area Code
4. If offered employment, how soon can you report to work?
Please list professional, trade, business, or civic associations and any offices held. (Exclude organizations which would reveal sec, race, religion, national origin, age, disability, veteran or other protected status.)  Organization  Offices Held
APPLICATION PROCESS
Alamo1 may not interview all applicants for vacant positions. Those applicants to be interviewed will be contacted by Alamo1. Applications will be actively considered fo up to 1 year following receipt. Applicants who wish to be considered after that time period, or who wish to apply for positions not listed on this application, must submit a new application to Alamo1.
APPLICANT VERIFICATION PLEASE READ CAREFULLY BEFORE SIGNING THE APPLICATION
I verify that all information provided on this application and resumes submitted to Alamo1 are true, correct and complete. I have accounted for all of my training, work experience, and other information requested on this application. I understand that any false, misleading, incomplete, or omitted information on this application or resumes will be cause for rejection of my application or termination of my employment, if discovered.
If I am considered for employment, I authorize Alamo1 and its agents to investigate the information contained on this application and in resumes, and to investigate my suitability for employment. I agree to furnish additional information if requested by Alamo1 or its agents. I authorize Alamo1 to investigate all statements in this application and to secure any necessary information from all my employers, references and academic institutions. I authorize Alamo1 to investigate criminal court records. I release Alamo1, its agents and all other persons or organizations from any claims, liabilities and damages resulting from obtaining or furnishing information about me.
I understand that Alamo1 endeavors to operate in a safe manner for all employees, clients and visitors. Because of this safety concern, Alamo1 requires that all individuals receiving a conditional employment offer successfully complete certain pre-employment procedures including, but not limited to, satisfactory employment references, testing for the current illegal use of drugs, driving record check, and verifying licensure/certification (if appropriate). I understand that if I do not consent to testing for the current illegal use of drugs, or produce a positive test result, or fail to successfully complete all of Alamo1's pre-employment procedures, I will not be further considered for employment.
I understand that any offer of employment is contingent upon receipt of a satisfactory report concerning my academic credentials, and employment references. I further understand that any false information, misleading statements or employed me and for immediate dismissal if the Alamo1 has employed me.
I understand Alamo1 promotes an alcohol/drug free workplace. I agree to abide by the guidelines set forth in the Alamo1's alcohol/drug abuse policy. I understand it is the practice of Alamo1 to conduct pre-employment alcohol/drug testing at specific locations. Failure to successfully pass Alamo1's drug screening procedure will preclude my employment application from further consideration. As such, by making application for employment to alcohol/drug screening as directed by Alamo1. I will comply with all rules, regulations, and policies set forth in the Alamo1's policy manual or other communications distributed by Alamo1.
If employed, I understand that I will be asked to complete a Federal I-9 Form and to provide documentation of my identity and documentation verifying my right to work in the United States.
I understand that this application is not intended as a job offer or an employment contract for any time period. Any employment can be terminated at any time by Alamo1 or me without notice and/or without cause. I understand that the position being applied for requires frequent and punctual attendance and dependable performance, and that I may be required to work various shifts and schedules as directed by my supervisor.
I understand that nothing in this employment application, in Alamo1's policy statements or personnel guidelines, or in my communications with any Alamo1 official is intended to create an employment contract between Alamo1 and me. I also understand that Alamo1 has the right to modify any of its policies without giving notice of the changes to me. No promises of employment have been made to me. I acknowledge that Alamo1 employs individuals under the employment-at-will doctrine and that this is not subject to any changes. I understand that if an employment relationship is established, I have the right to terminate my employment at any time for any reason. I also understand that the Alamo1 retains the right to terminate my employment at any time for any reason.
I hereby acknowledge that I have read and understand the preceding statements.
If employed, I agree to comply with Alamo1's policies, rules and procedures as modified from time-to-time.

Signature (Full Name)

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

# RELEASE AUTHORIZATION

As the applicant named below, I authorize Alamo1 and its agents to (i) verify any information provided on my employment application and any supplemental questionnaire or resume submitted to Alamo1; (ii) obtain information regarding my skills, work habits, education, conduct, and suitability for employment from past and present employers, educational institutions, and listed or developed references; (iii) obtain information from law enforcement authorities, governmental agencies and military services regarding my conduct and any criminal violations; and (iv) obtain information regarding any professional license or certification applicable to my employment. I further authorize all institutions and persons to respond to Alamo1's questions and to provide all information requested. I release Alamo1 and all persons and institutions from any claims, liabilities and damages resulting from obtaining or furnishing information about me. A copy of this authorization shall be as valid as the original.

Applicant's Signature	Date
Applicant's Printed Name	Social Security Number

# BACKGROUND DISCLOSURE AGREEMENT

In considering applicants for employment, Alamo1 conducts certain pre-employment procedures including, but not limited to, obtaining employment references and verifying an applicant's criminal conviction record. Alamo1 is required to submit certain identifying information to state authorities in order to obtain criminal conviction information, including legal name, social security number and date of birth. Alamo1 will verify your Driver's License/State Identification and Social Security card for the sole purpose of conducting a background check. Information regarding date of birth will be used only to obtain verification of any criminal record and not for any other purpose. Please provide the information requested below so that Alamo1 can complete its pre-employment verifying procedures.

Legal Name (please print)		Date of Birth
Former Names and/or aliases (if	applicable, please print)	
Social Security Number		Driver License Number & Issuing State or Identification Card (if applicable)
Name of College/University	City/State	Date of College Graduation (if applicable)
		vill result in your not being further considered for formation you have provided is true, correct and
 Applicant's Signature		ate

# **Affirmative Action: Voluntary Self Identification Form**

Alamo1 is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

# **Section 1: General Applicant Information**

IVAI	iie				Date		
Pos	Position applied for:						
Sect	Section 2: Please check (4) all that apply (See reverse for definitions)						
Rac	e or Ethnic Identity	Gender	**Vete	an (	Status		
	Hispanic or Latino	☐ Male	□ Viet	nan	n Era Veteran		
	White (not Hispanic or Latino)	□ Female	☐ Disa	ble	d Veteran		
	Black or African American (not Hispanic or Latino)		□Spec	ial [	Disabled Veteran		
	Native Hawaiian or Pacific Islander (not Hispanic or Latino)		□ Oth	er P	rotected Veteran		
	Asian (not Hispanic or Latino)		☐ Rec	entl	y Separated Veteran		
	American Indian or Alaskan Native (not Hispanic or Latino)		**Othe	er			
	Two or More Races (not Hispanic or Latino)		□ Indi	vidu	al with Disabilities		
I do not wish to Self-Identify □							
Signature:							
How did you hear of our opening?							
	Current Employee   Newspaper Ad	□ Recruiter 〔	□ Other -	Expl	ain Below:		
Fo	r Human Resources Use Only:	Requisition	#		Job Group		

[\*\*Editor's note: According to 41 CFR 60-741.42, there are only two circumstances when an employer may ask a disabled applicant to self-identify on a pre-offer basis:

- (1) The invitation is made when the contractor <u>actually is undertaking affirmative action for individuals</u> <u>with disabilities at the pre-offer stage</u>; or (2) The invitation is made pursuant to a Federal, state or local law requiring affirmative action for individuals with disabilities.
- (2) Federal contractors/subcontractors with 50 or more employees and federal contracts or subcontracts of \$50,000 or more are required to invite applicants to self-identify as a protected veteran prior to making a job offer, in addition to the post-offer self-identification that is already required. The pre-offer invitation to self-identify may be included in the contractors' application materials.}

### **EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES**

## **Hispanic or Latino**

A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

## White (Not Hispanic or Latino)

A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

## Black or African American (Not Hispanic or Latino)

A person having origins in any of the black racial groups of Africa.

#### **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)**

A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

## Asian (Not Hispanic or Latino)

A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

### American Indian or Alaska Native (Not Hispanic or Latino)

A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

## Two or More Races (Not Hispanic or Latino)

All persons who identify with more than one of the above five races.

## Individual with Disabilities

Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

## **Veteran of the Vietnam-Era**

Defined as (a) an active duty wartime or campaign badge veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense. (b) an Armed Forces service medal veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

#### **Disabled Veteran**

Defined as (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

## **Special Disabled Veteran**

Defined as a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability:

- 1. Rated at 30 percent or more; or
- 2. Rated at 10 or 20 percent in the case of a veteran who has been determined under 38 U.S.C. 3106 to have a serious employment handicap; or
- 3. A person who was discharged or released from active duty because of a service-connected disability.

#### Veteran of the Vietnam Era

Defined as a person who served on active duty for a period of more than 180 days, and was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty occurred:

- In the Republic of Vietnam between February 28, 1961, and May 7, 1975; or
- Between August 5, 1964, and May 7, 1975, in all other cases; or
- Was discharged or released from active duty for a service-connected disability if any part of such active duty was performed In the Republic of Vietnam between February 28, 1961, and May 7, 1975; or between August 5, 1964, and May 7, 1975, in all other cases.

## **Recently Separated Veteran**

Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.

## **Pre-JVA Veteran**

Defined as an individual who is an employee of or applicant to a contractor with a contract of \$25,000 or more entered into prior to December 1, 2003 and unmodified since to \$100,000 or more, and who is a special disabled veteran, veteran of the Vietnam era, pre-JVA recently separated veteran, or other protected veteran.

### **Armed Forces Service Medal Veteran**

Defined as any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

### **Active Duty or Wartime Campaign Badge Veteran**

Defined as a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.

# **Pre-Offer Self-Identification Form for Protected Veterans**

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the jobs for Veterans Act of 2002, 38 U.S.C. Sec. 4212 (VEVERRA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

• A "disabled veteran" is one of the following:

- a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
- a person who was discharged or released from active duty because of a service-connected disability.
- A "recently separated veteran" means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An "active duty wartime or campaign badge veteran" means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An "Armed forces service medal veteran" means a veteran who, while serving on active duty in the U. S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Offer 12985.

Protected veterans may have additional rights under USERRA—the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free at 1-866-4-USA-DOL.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

I identify as one or more of the classification of protected veteran listed above.

[ ] [ ]	I am not a protected veteran I do not wish to disclose my status
that would ena physical layout	sabled veteran it would assist us if you tell us whether there are accommodation we could make ble you to perform the essential functions of the job, including special equipment, changes in the of the job, changes in the way the job is customarily performed, provision of personal assistance her accommodations. This information will assist us in making reasonable accommodations for
0.1	

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are consistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed.

Date	Name Printed	Signature