

SME Industries

EMPLOYMENT APPLICATION

	ation form to your computer om or print and mail to SME						
Date of Application:							
SME INDUS	SME INDUSTRIES COMPANIES:						
Please select	Company for application	on:					
_	ntractors	· —					
I. PERSONA	L INFORMATION AND	CONTACT D	ATA:				
Name:		Email:					
Address:							
City/State/Zip:							
	For:	Salary Des	sired:				
Sex: Male							
	red: Full-Time Part-Ti	_					
When are you ava	ailable for work?						
II. EDUCATI	ON AND TRAINING:						
Do you have a Hi	gh School Diploma or GED Cer	rtificate? Yes 🔲	No 🔲				
Education:							
Type of School	School and Mailing Address	Years Completed	Major	Degree			
High School							
College Bus. or Trade School							
Professional School							
Other							

Specialized Training:

Program/Courses	Company/School	Dates	Credits Earned	Certificate Received

III. EMPLOYMENT HISTO	ORY:				
Current Employment: Are you are not currently working and beg	currently employed?				
Name of Employer:					
Complete Address:					
Phone Number:	Na	me of Last S	upervisor:		
Dates of Employment: From:		To:			
Salary History: From:		To:			
Current Job Title:					
Reason for Leaving (be specific):					
List the jobs you held, duties perfo this company:	ormed, skills used or lear	ned, advand	cements or prom	otions while y	/ou worked a
May we contact your employer? Past Employment: Please list yo recent position. If you were self-er	our past work experience				
Employer #1: Name of Employer:	:				
Complete Address:					
Phone Number:	Na	me of Last S	upervisor:		
Dates of Employment: From:		To:			
Salary History: From:		To:			
Last Job Title:					
Reason for Leaving (be specific):					
List the jobs you held, duties perfo this company:	ormed, skills used or lear	ned, advanc	cements or prom	otions while y	/ou worked a
May we contact this employer?	Yes No				

Employer #2: Name of Employer	:		
Complete Address:			
Phone Number:	Name	of Last Supervisor:	
Dates of Employment: From:		To:	
Salary History: From:		To:	
Last Job Title:			
Reason for Leaving (be specific):			
List the jobs you held, duties perfo this company:	ormed, skills used or learned	l, advancements or pr	omotions while you worked at
May we contact this employer?	Yes No		
Employer #3: Name of Employer	•		
Complete Address:			
Phone Number:	Name	of Last Supervisor:	
Dates of Employment: From:		To:	
Salary History: From:		To:	
Last Job Title:			
Reason for Leaving (be specific):			
List the jobs you held, duties perfo this company:	ormed, skills used or learned	l, advancements or pr	omotions while you worked at
May we contact this employer?	Yes 🗆 No		
Additional Employers can be adde			
IV. PROFESSIONAL REF	ERENCES:		
List 3 (three) references other tha performance.	n family or relatives that ca	n objectively assess y	our professional or scholastic
Name	Position	Company	Phone

V. ADDITIONAL SKILLS AND QUALIFICATIONS:
Summarize special skills and qualifications you would like us to consider including certifications and licenses.
Skills:
Certifications:
Typing:
Computer: PC Mac Both
Program Applications (list all that apply):
Do you have your own tools? (List):
Other skills:
Use this space to add any additional information necessary to describe you full qualifications for the position which you are applying:
VI. GENERAL EMPLOYMENT CONSIDERATIONS AND QUESTIONS:
Are you over the age of 18? Yes No
Are you legally eligible for employment in the U.S.? Yes No
Note: Anyone offered employment is required to provide identification and documentation.
Have you ever been convicted of any violation of law other than a minor traffic violation? Yes No
Note: A conviction will not necessarily bar you from employment. If yes, please explain:
Have you ever been dismissed or asked to resign from any position? Yes No
If yes, please explain:
Did you complete this application yourself?: Yes No If not, who did?
May we contact you at work? Yes No If Yes, Telephone number:

PRE-EMPLOYMENT DRUG SCREENING is conducted for all positions within **SME** Industries. This application for employment shall be considered active for a period of time not to exceed six months. Any applicant wishing to be considered for employment beyond this time period will need to re-apply each six months.

I certify that the answers given on this application are TRUE and COMPLETE to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary to arrive at an employment decision. I therefore authorize SME Industries to investigate all statements made on this application and to discuss the results of its investigation with those responsible for hiring. I further authorize SME Industries to contact former employers and references who can verify information, and I give my consent for former employers and other contacted persons to respond to questions pertaining to information on this application or related to the job for which I am applying. Further, I release from liability all employers and other persons contacted, who provide to SME Industries such career information. I also understand that should an investigation at any time disclose misrepresentations or falsification of information contained in this document, my application will be disapproved and my name removed from any further consideration for employment. In the event of employment, I understand that false or misleading information given in my application or interviews may result in termination. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relation-ship with SME Industries is of an "at-will" employment relationship and may not be changed by written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. By placing your name in the box below you are effectively acknowledging and certifying that all answers on this application are TRUE and CORRECT.

Name and Date:	
Opportunity Laws. Applicants are encouraged	n in order to comply with its obligations under all applicable Equal Employment to complete this form which will be separated from the application and used for dustries' policy, any individual who knowingly falsifies a race or sex claim is subject
Position applied for:	
A. How did you first learn about the job fo	r which you are applying? (Select only one)
Billboard	Employee Referral
☐ Job Bulletin	☐ Walk-In
Radio Advertisement	Federal/State Employment Service
☐ Car/Truck Magnet	☐ Internet Job Site (Name)
■ SME Steel Website	☐ Other
Job Fair (location)	
	ment and other items needing explanation.
Complete Address:	
Phone Number:	Name of Last Supervisor:
Dates of Employment: From:	To:
Salary History: From:	To:
Last Job Title:	
Reason for Leaving (be specific):	
	skills used or learned, advancements or promotions while you worked at
this company:	
May we contact this employer? ☐ Yes [□ No

CONFIDENTIAL

Invitation to Self-Identify Race/Ethnicity and Military Status

SME-Industries companies are subject to certain nondiscrimination and affirmative action recordkeeping – reporting requirements in order to comply with Equal Employment Opportunity federal law and executive orders. In order to comply, SME invites all field employees to voluntarily self-identify their race/ethnicity, gender and military status.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with applicable federal laws and executive orders. If you choose not to self-identify at this time, the federal government requires SME to determine this information by visual survey and/or by other information.

All SME Industries applicants and employees are treated during employment without regard to race, color, national origin, ancestry, sex, sexual orientation, gender identity or expression, religion, age, disability, marital status, pregnancy, or veteran status.

This data will be kept in a CONFIDENTIAL file, separate from all other applicant and new hire paperwork.

Name: I		Date:		
Pos	ition Applied For: Produ	uction, Skilled Trades, and I	Maintenance	
	Welder Apprentice Welder Helper	☐ Welder Journeyman☐ Painter Journeyman	☐ Welder / Fitter☐ Painter Helper	MaintenanceTechnicianMaterial Handler
	Other Skilled Trade:		☐ Other Production Posit	_
Pos	ition Applied For: Office	e, Technical, and Profession	nal	
	Accounting	Project Management	Detailing	Benefits
	Drafting	Purchasing	Operations	☐ Safety
	Quality	Estimating	Management	
	Sales / Marketing	L.T.	Human Resources/	
	Other Office:		Other Professional Pos	sition:
Ra	ce or Ethnic Grou	ıp:		
	Hispanic or Latino: a p		erto Rican, South or Central An	nerican, or other Spanish
_	White (Not Hispanic of East, or North Africa.	or Latino): a person having o	origins in any of the original peo	oples of Europe, the Middle
_	Black or African Ame of Africa.	rican (Not Hispanic or La	tino): a person having origins	in any of the black racial groups
	-	ntinent, including, for example		oples of the Far East, Southeast n, Korea, Malaysia, Pakistan, the
_		• •	nic or Latino): a person havin America), and who maintains a	

Mi	litary Status: (Please check all that apply)
	Not a Veteran: did not serve in the US military, ground, naval, or air service.
	Veteran: if served on active duty in the US military, ground, naval, or air service and were discharged with other than a dishonorable discharge.
	Disabled Veteran: a veteran of the US military, ground, naval, or air service, who is entitled to disability compensation under laws administered by the Veterans Administration or were discharged or released from active duty because of a service-connected disability.
	Special Disabled Veteran: if served on active duty in the US military ground, naval, or air service and (1) were discharged or released from active duty because of a service-connected disability, or (2) are entitled to compensation (or would be entitled to compensation) for certain disabilities under laws administered by the Department of Veteran Affairs (i.e., disabilities rated at 30 percent or more, or at 10 or 20 percent if you have been determined to have a serious employment handicap).
	Other Protected Veteran: if served on an active duty during a war; or served on active duty during a campaign or expedition for which a campaign badge has been awarded. A list of military engagements included in this category may be found on the US Office of Personnel Management website at: www.opm.gov/veterans/html/vgmedal2.asp.
	Newly/Recently Separated Veteran (3-year): during the three-year period beginning on the date of your discharge or release from active duty in the US military, ground, naval, or air service.
	Vietnam–Era Veteran: if served on active duty for a period of more than 180 days, and were discharged with other than a dishonorable discharge, in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or between August 5, 1964, and May 7, 1975, in all cases; or were 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.
	Armed Forces Service Medal Veteran: if while serving on active duty in the US military, ground, naval, or air service, you participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.
Di	sability Status:
Do	you have a disability as defined by the Americans with Disabilities Act? 🔲 Yes 🔲 No
	ou have not requested an accommodation for your disability and wish to do so, please contact SME Human sources by calling (801) 280-4976.

Revised March 2011

Additional Explanation	s: Please use the space	ce below for other it	ems needing extra s	space.