



CUSTOM FIBREGLASS MANUFACTURING COMPANY

(A DIVISION OF TRUCK ACCESSORIES GROUP)

1711 Harbor Avenue, Long Beach, CA 90813



(562) 432-5454 jobs@snugtop.com

APPLICATION FOR EMPLOYMENT

Please Print Clearly

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Date _____

Applicant's Name _____ Position Applied For _____

Telephone Number () _____ - _____ Alternate or Cellular Telephone Number () _____ - _____

Present Address _____

_____ How long have you lived there _____ / _____
City, State, Zip Months/Years

Previous Address _____

Street, Apartment, or Unit Number _____
_____ How long have you lived there _____ / _____
City, State, Zip Months/Years

Hourly Rate Expectation / Salary Requirement _____

Are you available: Day Shift Swing Shift Weekends Overtime

Note: In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification form upon hire.

Yes No Are you at least 18 years of age or older?

Yes No Are you able to work overtime as required? Date on which you can start work if hired _____

Yes No Have you previously applied for employment with this Company? If yes, when? _____

Yes No Have you ever been employed by this Company? If yes, provide dates of employment, location, and reason for separation from employment. _____

Yes No Are you capable of satisfactorily performing the essential job duties required of the position for which you are applying, with or without reasonable accommodation. _____

Yes No Have you ever initiated an act of violence in the workplace?

If Yes, please provide the date(s) and explain so that individual circumstances can be considered. (A "Yes" answer will not necessarily disqualify you from employment) _____

Yes No If requested to drive as a part of your job duties, do you have a valid driver's license issued by the state in which you would be working? _____

If you are requested to drive as part of your job duties and you responded "yes" to the above question, please complete the following information regarding your driver's license:

STATE _____ CLASS _____ DRIVER'S LICENSE NO _____

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or last employer listed first. Account for all periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment.

Employer 1

Name _____ Address _____ Type of Business _____
Telephone () _____ - _____ Dates Employed From _____ To _____
Job Title _____ Duties _____
Supervisor's Name _____ May we contact? Yes No If No, why not? _____
Reason for Leaving _____ What will this employer say was the reason your employment terminated? _____
How much notice did you give when resigning? If none, explain. _____

Employer 2

Name _____ Address _____ Type of Business _____
Telephone () _____ - _____ Dates Employed From _____ To _____
Job Title _____ Duties _____
Supervisor's Name _____ May we contact? Yes No If No, why not? _____
Reason for Leaving _____ What will this employer say was the reason your employment terminated? _____
How much notice did you give when resigning? If none, explain. _____

Employer 3

Name _____ Address _____ Type of Business _____
Telephone () _____ - _____ Dates Employed From _____ To _____
Job Title _____ Duties _____
Supervisor's Name _____ May we contact? Yes No If No, why not? _____
Reason for Leaving _____ What will this employer say was the reason your employment terminated? _____
How much notice did you give when resigning? If none, explain. _____

Please explain in detail all gaps in your employment history in excess of one month.

Yes No Have you ever been terminated or asked to resign from any job? If Yes, how many times? _____

Yes No Has your employment ever been terminated by mutual agreement? If Yes, how many times? _____

Yes No Have you ever been given the choice to resign rather than be terminated? If Yes, how many times? _____

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

List all special technical skills that you feel qualify you for the job for which you are applying (For example, computer programming/language, software, equipment operation, special tools or machines, etc.)

Education	School Name and Location (Address, City,	Course of Study	Graduate? (Yes/NO)	# of Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					

Honors Received _____

If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside. I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law. If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property. I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign confidentiality, restrictive covenant, and/or conflict of interest statement, as well as an agreement to arbitrate. I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY. IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation. I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF THIRTY (30) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY. I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant _____ Signature Date ____/____/____

HOW DID YOU HEAR ABOUT US?

Walk-In Craigslist Indeed Other _____

Employee Referral: Referred by/: _____