RPM Solutions, Inc. Application for Employment AN EQUAL OPPORTUNITY EMPLOYER

Please mail, fax, or e-mail inquiries to: Attn: Personnel Dept. RPM Solutions, Inc. 333 Concourse Drive **Employment Information On-line** Rapid City, SD 57703 www.rpmsolutions.com/employment Fax: 605-348-7848 E-mail: Personnel@RPMSolutions.com PERSONAL INFORMATION NAME (LAST, FIRST MIDDLE) PRESENT ADDRESS PERMANENT ADDRESS PHONE NO. **EMAIL** REFERRED BY **EMPLOYMENT DESIRED** POSITION APPLYING FOR DATE YOU **SALARY DESIRED CAN START** TYPE OF EMPLOYMENT DESIRED Temporary Full time Part time Educational Co-op Seasonal HAVE YOU EVER BEEN EMPLOYED IF YES, Yes No HERE BEFORE? WHEN? HAVE YOU EVER FILED AN IF YES, Yes No APPLICATION HERE BEFORE? WHEN? ARE YOU A U.S. CITIZEN? Yes No ARE YOU LEGALLY ELIGIBLE FOR Yes No EMPLOYMENT IN THE U.S.? ARE YOU OVER 18 YEARS OF AGE? Yes No HOW DID YOU LEARN ABOUT US? Advertisement Friend Relative **Employment Agency** Other ARE YOU ON LAY-OFF AND SUBJECT TO Yes No RECALL? WILL YOU TRAVEL IF JOB REQUIRES IT? Yes No Yes No WILL YOU WORK OVERTIME IF REQUIRED? WILL YOU WORK SHIFTS? Yes No ARE YOU ABLE TO OBTAIN A PASSPORT/VISA FOR TRAVEL IF Yes No REQUIRED?

Form PP1025 1 REV 3-19-18

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability,

marital or veteran status, sexual orientation, or any other legally protected status.

Employment History

List your last four (4) employers starting with the most recent, including military experience. Explain any gaps in employment in comments section below.

Employer #1 (Most Recent)	Telephone	Dates Employed	Summary of work
	() -	FROM TO	
Address			
Job Title		Hourly Rate/Salary	
		Starting	
Immediate Supervisor and Title		\$ PER]
Reason for Leaving		Hourly Rate/Salary	
-		Final	
May we contact for reference?	Yes No Later	\$ PER	
Employer #2	Telephone	Dates Employed	Summary of work
, ,	() -	FROM TO	,
Address			
Job Title		Hourly Rate/Salary	4
Job Title		Starting	
Immediate Supervisor and Title		\$ PER	-
		γ	
Reason for Leaving		Hourly Rate/Salary	
		Final	
May we contact for reference?	Yes No Later	\$ PER	
Employer #2	Telephone	Dates Employed	Summary of work
	() -	FROM TO	,
Address			
Job Title		Hourly Rate/Salary	4
Job Title		Starting	
Immediate Supervisor and Title		\$ PER	-
		. =	
Reason for Leaving		Hourly Rate/Salary	
		Final	
May we contact for reference?	Yes No Later	\$ PER	
Employer #2	Telephone	Dates Employed	Summary of work
	() -	FROM TO	
Address			
Job Title		Hourly Rate/Salary	1
		Starting	
Immediate Supervisor and Title		\$ PER	1
Reason for Leaving		Hourly Rate/Salary	1
· U		Final	
May we contact for reference?	Yes No Later	\$ PER	

Comments (including explanation of gaps in employment)

Skills and Qualifications: Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with our company.

A. List last three (3) scho degree or diploma earne field of study (if applicab	d, if any and		-				•	
A. School	B. No Y			D. GPA Class I	Rank E		. Major	E. Minor
st any foreign language(s) and che		ck box that best descr		ribes your skill level Read and Speak	Read only		Speak o	nly
List name and telephone								not previous
List name and telephone			ol or persona			ated to		Yea
References List name and telephone supervisors. If not applic			ol or persona	I references that are		ated to	you.	Year
List name and telephone supervisors. If not applic	able, list thre		ol or persona	I references that are		Tele	you.	Year
List name and telephone supervisors. If not applic	able, list thre		ol or persona	I references that are		Tele	you.	e not previous Year Know
List name and telephone supervisors. If not applic Name In case of Emergency No	tify	ee schoo	el or persona EM	AIL	e not rel	Tele	you.	Year

List any additional information you would like us to consider.

Agreement

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

It is understood and agreed upon that any offer of employment will be contingent on the following:

- 1. Passing a pre-employment drug screen.
- 2. Acceptable background check.
- 3. Acceptable motor vehicle report.
- 4. Completion of a post-offer medical questionnaire.
- 5. When applicable, completion of a post-offer functional job assessment.
- 6. When applicable, completion of a Department of Transportation Physical.
- 7. Proof of U.S. Citizenship or immigration status will be required.
- 8. Agreement to comply with our clean shaven policy in order to meet OSHA standards for respirator fit testing as well as respirator use when required.
- 9. Agreement to comply with all of our RPM company policies.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.

Signature of Applicant Date	//
-----------------------------	----