



Application for Employment

Position Applied For: _____ Today's Date: _____

Almeda-Genoa Constructors is committed to equal opportunity for applicants and employees without regard to race, color, sex, age, religion, national origin, disability, marital status, veteran status, sexual orientation, genetic information, or any other characteristic protected by law. This policy applies to all terms and conditions of employment, including but not limited to, hiring, training, promotions, discipline, transfers, leaves of absence, and termination of employment.

Please inform the Company's Human Resources Department if you need assistance completing this application for employment or otherwise participating in the application process.

PLEASE TYPE OR PRINT. Complete each section of this application and attach a resume if you have one.

Name (Mr./Mrs., First, Middle, Last):			
Street Address:		City, State & Zip:	
Home Phone:	Work Phone:	Other Phone:	Email:
Date you can start working:		Salary Requested:	
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently authorized to work in the U.S.?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you now, or will you in the future, require sponsorship for a work visa?	<input type="checkbox"/> Yes <input type="checkbox"/> No		

SKILLS: Please list any particular skills, training or qualifications which you feel would qualify you for work with the Company. Include relevant computer systems and software packages of which you have a working knowledge, and note your level of proficiency (basic, intermediate, expert). Attach additional pages as necessary.

How did you hear about Alameda-Genoa Constructors? Check all that apply:

- Employment agency (name: _____)
- Referral by employee (name: _____)
- Online newspaper, magazine, website or posting (name: _____)
- Newspaper or magazine print ad (name: _____)
- Career fair
- Other (please specify: _____)

EDUCATION

Type of School	School Name and Location	Highest Grade or Level Completed	Degree/Diploma
High School or G.E.D. equivalent			
College or University			
Vocational or Trade School			
Graduate School			

Other licenses, certificates, and/or professional affiliations which are relevant to the position for which you are applying:

WORK AND VOLUNTEER EXPERIENCE

List your work and relevant volunteer experience, starting with the most recent or present organization. Resumes may be submitted in addition to, but not in lieu of, completing the following section.

In order that we may verify prior experience, have you used another name in any of your previous jobs?	
<input type="checkbox"/> No <input type="checkbox"/> Yes (give name and specify organization: : _____)	

Dates From/To	Organization Name, Address, Telephone	Position/Title	Rate of Pay
Supervisor Name/Contact Information:		Reason for Leaving:	

Dates From/To	Organization Name, Address, Telephone	Position/Title	Rate of Pay
Supervisor Name/Contact Information:		Reason for Leaving:	

Dates From/To	Organization Name, Address, Telephone	Position/Title	Rate of Pay
Supervisor Name/Contact Information:		Reason for Leaving:	

Dates From/To	Organization Name, Address, Telephone	Position/Title	Rate of Pay
Supervisor Name/Contact Information:		Reason for Leaving:	

PROFESSIONAL REFERENCES

List three persons not related to you who have knowledge of your work performance.

Name	Telephone Number or Email Address
When and where did you work with this individual?	

Name	Telephone Number or Email Address
When and where did you work with this individual?	

Name	Telephone Number or Email Address
When and where did you work with this individual?	

PLEASE READ THE INSTRUCTIONS BELOW CONCERNING INDIVIDUAL STATE REQUIREMENTS BEFORE ANSWERING THE FOLLOWING QUESTION:

Have you ever been convicted of a crime that has not been expunged, pardoned, annulled, statutorily eradicated, impounded or sealed by the Court? A criminal record does not constitute an automatic bar to employment and will be considered only as it substantially and reasonably relates to the job in question.

Yes _____ No Record _____

If you selected yes, please explain: _____

INSTRUCTIONS:

California Applicants: You should answer "No Record" with respect to:

- (1) Any misdemeanor conviction for which probation has been completed or discharged and the case has been judicially dismissed; or
- (2) Any conviction (or record regarding conviction) that resulted in a referral to, and participation in, any pretrial or post trial diversion program; or
- (3) A conviction for marijuana use or possession which is more than two years old at a time you execute this application.

Georgia Applicants: You may answer "No Record" regarding any case discharged pursuant to the First Offenders Act.

Massachusetts Applicants: Massachusetts applicants should not respond to the above question regarding criminal record information.

Washington State Applicants: Limit your answer to convictions for which the date of conviction or prison release, whichever is more recent, is within ten (10) years of today's date.

APPLICANT'S CERTIFICATION

Please initial each paragraph and sign below.

- _____ I certify that all answers and statements made by me on this application are true and complete to the best of my knowledge, and that I have not knowingly withheld any information that could affect my consideration for employment. I understand that any falsification, misrepresentation or material omission of information submitted on this application, my resume, or in any interview(s) will constitute grounds for denial of or immediate termination from employment.

- _____ I understand that nothing in this application for employment is intended or should be construed as an offer, agreement, or contract of employment.

- _____ I further understand that employment at Alameda-Genoa Constructors is "at-will," which means that both the Company and its employees are free to terminate the employment relationship at any time, with or without cause or advance notice.

- _____ In the event that I am employed by Alameda-Genoa Constructors, I agree to comply with all of its employment policies and its Code of Business Ethics and Code of Conduct. Alameda-Genoa Constructors, reserves the right to amend or terminate its policies at any time, with or without cause or advance notice.

- _____ I understand that any offer of employment I may receive is contingent upon my successful completion of the Company's pre-employment screening process, the result of which must be satisfactory to the Company. This process may include a background and reference check, and a pre-employment physical examination.

- _____ I understand that no representative or agent of Alameda-Genoa Constructors, has the authority to make any agreement that is contrary to the foregoing without the written approval of the President. Any such agreement must be in writing and signed by the President to be binding on the Company.

Signature _____

Date _____

<p>This application for employment is good for 60 days only. Consideration for employment after 60 days requires a new application.</p>



Para información en español, visite www.consumerfinance.gov/learnmore o escriba a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 20006.

A Summary of Your Rights Under the Fair Credit Reporting Act

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 the 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, D.C. 20006.

- 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 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).
- 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. Federal enforcers are

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051



Fair Credit Reporting Act Candidate Notice, Disclosure, and Release Authorization

I. In connection with my application for employment at Almeda-Genoa Constructors (the Company), I understand that a consumer report and/or investigative consumer report will be ordered that may include information as to my character, general reputation, personal characteristics, mode of living, work habits, performance and experience, along with reasons for termination of past employment. I understand that to the extent permitted by applicable law and as directed by company policy and consistent with the job described, the Company may be requesting information from public and private sources about me and can be disclosed to the processing agency below, including, but not limited to: social security number validation, criminal conviction records, employment and earnings history, education, credit, licensing and certification checks, references, military service, sex offender registry, civil cases, OIG/GSA, OFAC/Patriot Act records, any sanctions list, FBI fingerprinting, and if applicable, workers' compensation injuries, driving record, drug testing results. If company policy requires and to the extent permitted by law, I am willing to submit to alcohol and/or drug testing to detect the use of drugs or alcohol prior to and during employment.

II. Medical and workers' compensation information will only be requested in compliance with the federal Americans with Disabilities Act (ADA) and/or any other applicable state or local laws and only after a conditional job offer is made.

III. I acknowledge that a telephonic facsimile (Fax) or photographic copy shall be as valid as the original. This release is valid for most federal, state, and county agencies. In the event that an agency or record source requires an alternative release form or additional identifying characteristics in order to release the requested information, I agree to provide the additional information and sign any additional release authorizations, if so requested by the Company.

IV. I acknowledge that the Fair Credit Reporting Act and certain state laws give you specific rights in dealing with consumer reporting agencies. I acknowledge that I have received these rights in the attached documents.

V. According to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a Consumer Reporting Agency. If so, I will be notified, before making the adverse action, and I will be provided with a copy of the report and a description in writing of my rights under the law and the address of the agency or the sources that provided the information.

VI. Applicants in Massachusetts, Minnesota, Oklahoma, New York, Maine, Washington, New Jersey, and California: if you want a free copy of the report(s) ordered, check this box. The report(s) will be sent to you by the Consumer Reporting Agency listed here: Castle Branch, 1845 Sir Tyler Drive, Wilmington, NC 28405; 888-723-4263

VII. You have the right to request, in writing, within a reasonable time, that we disclose the nature and scope of the information requested. Such disclosure will be made to you within 5 days of the date on which we receive the request from you or within 5 days of the time the report was first requested, whichever is the later. To receive this information or to inspect any files concerning such a report or to determine if a report has been requested, you may contact the Company of the Consumer Reporting Agency.

VIII. I hereby authorize, without any reservation, any law enforcement agency, institution, information service bureau, school, employer, reference, insurance company, or other applicable record source contacted by Almeda-Genoa Constructors (the Company) or its agent, to furnish the information described in Section I.

IX. If applicable, I hereby authorize release of information from my Department of Transportation regulated drug and alcohol testing records by my previous employer to Almeda-Genoa Constructors. (the Company). This release is in accordance with DOT Regulation 49 CFR Part 40, Section

40.25. I understand that information to be released by my previous employer is limited to the following DOT-regulated items: alcohol tests with a result of 0.04 or higher, verified positive drug tests, refusals to be tested, other violations of DOT agency drug and alcohol testing regulations, information obtained from previous employers of a drug and alcohol rule violation, and any documentation of completion of the return-to-duty process following a rule violation.

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. I understand that this information is confidential and will not be used for any other purposes. I hereby release the employer, its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel, both individually and collectively and all persons, agencies, and entities providing information or reports about me from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family, or associates arising out of the requests for or release of any of the above mentioned information or reports.

I, _____, agree that a facsimile or photocopy of this form is valid just like the original form. I acknowledge receipt of this Disclosure and the attached Fair Credit Reporting Act Summary of Rights.

Please print your full name. Last First Middle

Please print other names you have used (maiden name, surname, alias name) Driver's License Number State

Current Address City State Zip Code

Social Security Number Date of Birth

I CERTIFY THAT THE INFORMATION THAT I PROVIDED ON THIS FORM IS TRUE AND CORRECT. I UNDERSTAND THAT FALSE INFORMATION, MISREPRESENTATIONS, AND OMISSIONS MAY DISQUALIFY ME FROM CONSIDERATION FOR EMPLOYMENT, OR, IF I AM ALREADY HIRED OR ALREADY WORK FOR THE COMPANY, THAT I MAY BE DISCIPLINED, UP TO AND INCLUDING TERMINATION.

Signature Today's Date



VOLUNTARY EEOSELF-DISCLOSURE

Almeda-Genoa Constructors is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, Almeda-Genoa Constructors invites applicants to voluntarily self-identify by race or ethnicity and by disabled and/or veterans 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 will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Name _____ Date _____

Position Applied For: _____

Referral Sources: Online Posting (which website? _____) Referral by Employee (who? _____)

Walk In Employment Agency(who?) _____ Other Advertisement (where? _____)

Other, if other, please specific _____

GENDER: Male Female Choose Not to Self Identify

RACE/ETHNICITY:

Are you Hispanic or Latino?

No, I am not Hispanic or Latino

Yes, I am Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

If not, please select which race you are:

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.

Choose Not to Self Identify

DISABLED/VETERAN STATUS:

Disabled Person: means a disabled person who (1) has a physical or mental impairment which substantially limits one or more of such a person's major life activities or bodily functions; or (2) has a record or a history of such impairment; or (3) being regarded as having a disability

Disabled Veteran: means (1) 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.

Armed Forces Service Medal Veteran: means 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 (61 FR 1209).

Recently Separated Veteran: means any veteran who served on active duty in the U.S. military, ground, naval or air service during the three-year period beginning on the date of such veteran's discharge or release from active duty.

Other Protected Veteran: means veterans 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.

Choose Not to Self Identify