IRC

Insulated Roofing Contractors • Since 1974

Office Employment Application

* indicates required fields

APPLICANT INFORMATION

Name*

First | Middle | Last

Address*

Street Address

Address Line 2

City | State | ZIP Code

Select State

Primary Phone* | **Alternate Phone** | **Email***

How Did You Hear About Us?*

Select One

If referred by an employee of IRC, provide name:

Resume* *Please attach your resume and references (.pdf or Word .doc only).*

JOB SKILLS & TRAINING

Describe Your Skills*

Training & Certifications

REFERENCES

Please list two (2) professional references that are familiar with your work life.

Reference 1

Name*

First | Last

Phone* | **Email*** | **Years Known***

Reference 2

Name*

First

Last

Phone* **Email*** **Years Known***

MISCELLANEOUS

Are you willing to complete a drug screen and background check as part of our drug free workplace?* ☐ Yes ☐ No

Have you ever been convicted of any misdemeanor or felony that has not been expunged by a court (this includes, without limitation, pleading guilty, pleading no contest, or having judicial finding of guilt)?* ☐ Yes ☐ No

Conviction will not necessarily disqualify an applicant from employment.

APPLICANT SIGNATURE

I certify that the information on this application is true and complete to the best of my knowledge. I understand that false or misleading information may result in my release.

Signature* **Date***

MM/DD/YYYY