



P.O. Box 520 Gonzales, LA

1710 Youngs Rd.
Morgan City, LA 70380
(985) 380-1022 (Phone)
(985) 380-1023 (Fax)

39804 Hwy.23
Boothville, LA
(504) 534-9454 (Phone)
(504) 534-9459 (Fax)

Application for Employment

(Please Print Clearly)

How were you referred to Fab-con, Inc.?
 Website TV Walk-In Word of Mouth Newspaper Sign/Billboard Other _____

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, or disability that does not prohibit performance of essential job functions.

Date: _____

I. Personal Information

Date of Birth: _____

Name: Last First Middle

Permanent Address City State Zip Code

Phone Number (Home & Mobile)

Emergency Contact (Outside of household) (Name, Relationship, Phone Number)

E-mail Address

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Position Applied For: _____

1. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify:

2. Do you have any relatives who are presently (or have formerly been) employed by Fab-Con, Inc.?

3. Are you at least 18 years of age? _____

4. Have you ever been convicted of a felony? ___ Yes ___ No If yes, please explain:

- A felony conviction is not an automatic disqualification for consideration for employment.

5. Do you have reliable transportation? ___ Yes ___ No If no, please explain how you will get to and from

work locations: _____



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II. Educational History

School Name/Location	Years Completed	Degree/Diploma
Elem/Jr. High _____		
High School _____		
College _____		
Tech. Training _____		
Other _____		

III. Employment Record *Please include all employment for the last five years.*

- | | |
|--|---|
| Company Name (Current or Most Recent Employer) | Position Held |
| Address | Dates Employed: _____
From To |
| Manager / Supervisor | Telephone Wage/Salary |
| Reason For Leaving | |
- | | |
|----------------------|---|
| Company Name | Position Held |
| Address | Dates Employed: _____
From To |
| Manager / Supervisor | Telephone Wage/Salary |
| Reason For Leaving | |
- | | |
|----------------------|---|
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Background Research Release

Please read this section carefully and acknowledge your understanding by signing your name in the space below.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.

1. Consent To Conduct Background Investigation

As a condition of and in consideration for Fab-Con, Inc.’s consideration of this application, I give permission to Fab-Con, Inc. to investigate my personal and employment history. I understand that this background investigation will include, but not be limited to, verification of all information on this application, as well as interviews with past employers. I further give permission to Fab-Con, Inc. to conduct this investigation and to discuss the results of this investigation in connection with my application for employment.

2. Consent To Contact Past Employers

I give permission to Fab-Con, Inc. to contact all employers listed in this application (except those specifically excluded) for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Fab-Con, Inc., consent to the release of such information orally or in writing, and hereby release them from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of Fab-Con, Inc. I further waive all rights I may have under state law to receive a copy of any written statement provided by any of my former employers to Fab-Con, Inc. I further agree to indemnify all past employers for any liability they may incur because of their reliance upon this release.

3. Cooperation With Investigation

I agree to fully cooperate in Fab-Con, Inc.’s background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state or local governmental agency will not release reference information or criminal history information directly to the employer, I agree to personally request such information to the extent permitted by law.

4. Falsification Statement

I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of this application, or, if discovered after an offer of employment, for immediate dismissal.

5. Employment “At Will”

In consideration of my employment, I agree to conform to the rules and regulations of Fab-Con, Inc., and my employment and compensation is “at will” in that they can be terminated with or without cause, and with or without notice, at any time, at the option of either Fab-Con, Inc. or myself, except as otherwise provided by law. I understand that no supervisor, foreman, or representative of Fab-Con, Inc., other than the President of Fab-Con, Inc., has authority to enter into any agreement for employment for any specified period of time or to make any agreement or contract to the foregoing, and that any promises to the contrary will only be relied upon by me if they are in writing and signed by the President of Fab-Con, Inc.

Applicant’s Signature _____ Social Security Number _____ Date _____

****For HR Use Only**

Date Hired _____ Position _____

Starting Salary _____



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Previous Employment Verification Form

I give permission to Fab-Con, Inc. to contact all employers listed in this application for references. I further give permission to all current or previous employers and/or managers to discuss my relevant personal and employment history with Fab-Con, Inc., consent to the release of such information orally and/or in writing and hereby release them for all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representatives of Fab-Con, Inc.

Employee Print: _____

SS#: _____

Employee Signature: _____

Date: _____

Please return filled out employment verification to the above fax number.

Company: _____

1. Dates of employment: _____
2. Job Title: _____
3. Reason for termination? _____
4. Eligible for rehire? _____

Additional comments:

Name: _____

Title: _____