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Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, sex, gender identity, national origin, age, disability, sexual orientation, marital status, veteran or military status or any other legally protected status. In accordance with the Immigration Reform and Control Act of 1986, both new employees and re-hires will be required to provide original documentation establishing their identity and authorization to work in the United States. The I-9 form will be used for this purpose and must be provided by the employee within three (3) days after employment begins.

NAME: _____ DATE: _____

MAILING ADDRESS: _____ CITY: _____

STATE: _____ ZIP: _____ PHYSICAL ADDRESS (if different from above): _____

PHONE: _____ EMAIL: _____

HOW DID YOU HEAR ABOUT R.M. PIPER, INC? Newspaper Online Employee Other _____

POSITION APPLIED FOR: _____

(Note: If applying for a truck driving position, please complete Driver Application Supplement #1 and DSMV505)

Are you authorized to work in the **United States**? YES NO Are you at least **18** years old? YES NO

Do you have a **valid** driver license? YES NO If yes, please provide: License ID #: _____

Issuing State: _____ Expiration Date: _____ Endorsements (check that apply) CDL-A CDL-B HZMT TANK

Do you have a **current** DOT Medical Card? YES NO If Yes, expiration date: _____

Do you have an OSHA-10 Card? YES NO If Yes, date of certification: _____

You will be asked for a photocopy of your driver license, DOT medical card and OSHA-10 card. Please attach a copy or have documents available if applying in-person or appearing for an interview.

Have you applied for a job with us before? YES NO If Yes, date: _____

Have you ever been employed with us before? YES NO If Yes, date: _____

On what date are you available for work? _____

Are you currently employed? YES NO If Yes, may we contact your present employer? YES NO

Are you currently on lay-off subject to recall? YES NO If Yes, employer: _____

Are you available to work: Full Time Part Time Seasonal

Due to the nature of our business, employees are expected to travel to assigned job site. Do you have reliable transportation? YES NO If No, please explain: _____

Please list relevant skills, training or experience: _____

Please list types of construction equipment that you can operate: _____

EMPLOYMENT HISTORY: Please provide detail for your last three jobs, listing most recent employer first

Start Date (MM/YYYY)	End Date (MM/YYYY)	1. Employer / Company	Town/City	Phone Number	Supervisor's Name
Position / Title		Duties / Responsibilities			
Pay Rate					

Start Date (MM/YYYY)	End Date (MM/YYYY)	2. Employer / Company	Town/City	Phone Number	Supervisor's Name
Position / Title		Duties / Responsibilities			
Pay Rate					

Start Date (MM/YYYY)	End Date (MM/YYYY)	3. Employer / Company	Town/City	Phone Number	Supervisor's Name
Position / Title		Duties / Responsibilities			
Pay Rate					

Please list other relevant jobs or work experience, if any _____

ADDITIONAL REFERENCES: Please provide at least one reference that could attest to your integrity, work ethic or dependability

Name	Town/City	Phone Number and/or Email	Relationship
1.			
2.			

APPLICANT'S CERTIFICATION AND AGREEMENT
 (PLEASE READ CAREFULLY)

By signing below and/or submitting this information electronically, I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that should R.M. Piper, Inc. offer me a job I must pass a post-offer physical exam and drug screen before employment begins. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand that completing this application does not indicate there is a position open and does not obligate R.M. Piper, Inc. to hire.

 Signature of Applicant

 Date

 Name (Please Print)

VOLUNTARY DATA SURVEY

Position(s) for which you are applying: _____ Date of Application: _____

Name: _____

R.M. Piper, Inc. solicits and completes construction projects for the federal government. In order to maintain eligibility for participation on these contracts; we must track our applicants by gender, race/ethnicity and veteran status by the position applied for.

We are an organization that values diversity and encourages women, minorities and veterans to apply. For this reason, we invite you to indicate your gender, veteran status and race/ethnicity below. This information is kept separate from your application and has no bearing on employment decisions. Responses will remain confidential within the Human Resources Department; and will be used only to compile annual reports of applicant and employee gender, race and veteran status. When reported, data will not identify any specific individuals.

1.

GENDER (check one): Male Female

2.

VETERAN STATUS:

Active duty wartime or campaign badge Veteran - A veteran 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.

Armed Forces Service Medal Veteran - 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, 3 CFR, 1996 Comp., p. 159).

Disabled Veteran – means (1) A 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.

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

3.

RACE / ETHNIC IDENTIFICATION:

ARE YOU HISPANIC OR LATINO? A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

Yes No If you answer "Yes" you have completed this form. If you answered "No" please select a race from the options below.

White A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Black or African American A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian 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 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 All persons who identify with more than one of the above five races. (Not Hispanic or Latino)

I do not wish to disclose.