

# TEXAS BARRICADE & SIGNS, LLC EMPLOYMENT APPLICATION

After completing this application, email it to:

[info@txbsigns.com](mailto:info@txbsigns.com)

**DYESS-PETERSON TESTING LABORATORY, INC.  
PETERSON DRILLING AND TESTING, INC.  
TEXAS BARRICADE & SIGNS, INC.**

**APPLICATION FOR EMPLOYMENT**

We are an equal opportunity employer. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

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**PERSONAL**

Date \_\_\_\_\_ Social Security No. \_\_\_\_\_

Name \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone No. \_\_\_\_\_ Alternate No. \_\_\_\_\_

Drivers License No. & State \_\_\_\_\_ Referred By \_\_\_\_\_

Do You Have a Commercial Drivers License \_\_\_ Yes \_\_\_ No ~ Class \_\_\_\_\_

Position Desired \_\_\_\_\_ Date You Can Start \_\_\_\_\_

Type Work Desired \_\_\_ Full Time \_\_\_ Part Time ~ Pay Expected \_\_\_\_\_

Will You Work Weekends \_\_\_ Yes \_\_\_ No ~ Will You Work Overtime \_\_\_ Yes \_\_\_ No

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**EDUCATION (Name & Location)**

High School \_\_\_\_\_ Did You Graduate \_\_\_ Yes \_\_\_ No

College \_\_\_\_\_ Did You Graduate \_\_\_ Yes \_\_\_ No

Trade or Business School \_\_\_\_\_ Did You Graduate \_\_\_ Yes \_\_\_ No

Other training, skills, or certifications \_\_\_\_\_

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**EMPLOYMENT HISTORY**

1. \_\_\_\_\_  
Employer Address Phone No. Position

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Dates Employed

Pay Rate

Reason for Leaving

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2. \_\_\_\_\_  
Employer Address Phone No. Position

\_\_\_\_\_  
Dates Employed Pay Rate Reason for Leaving

3. \_\_\_\_\_  
Employer Address Phone No. Position

\_\_\_\_\_  
Dates Employed Pay Rate Reason for Leaving

4. \_\_\_\_\_  
Employer Address Phone No. Position

\_\_\_\_\_  
Dates Employed Pay Rate Reason for Leaving

5. \_\_\_\_\_  
Employer Address Phone No. Position

\_\_\_\_\_  
Dates Employed Pay Rate Reason for Leaving

## REFERENCES

\_\_\_\_\_  
Name Address Phone No. Years Known

\_\_\_\_\_  
Name Address Phone No. Years Known

\_\_\_\_\_  
Name Address Phone No. Years Known

Can you lift 50 lbs. \_\_\_ Yes \_\_\_ No Do you have reliable transportation \_\_\_ Yes \_\_\_ No

Are you over age 18 \_\_\_ Yes \_\_\_ No Are you a U.S. Citizen \_\_\_ Yes \_\_\_ No

How many days have you missed from work in the past year and for what reasons?

Have you been convicted of any crime except traffic violations \_\_\_ Yes \_\_\_ No

**I authorize investigation on all statements contained in this application. The information in this application is true, correct and complete. If you employ me, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment creates no obligation upon you, the employer, to continue to employ me in the future. I understand that I will be drug tested during my probationary period and a negative drug test is a condition of employment.**

Date \_\_\_\_\_ Signature \_\_\_\_\_

# AUTHORIZATION FOR RELEASE OF INFORMATION FOR EMPLOYMENT SCREENING

## Driver Record Screening Disclosure

I hereby authorize Embark Safety LLC and its designated agents and representatives to conduct a comprehensive review of my driver record background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand that the scope of the consumer report/investigative consumer report may include information about my character, general reputation, personal characteristics, and mode of living as well as information that is not limited to, the following areas: names and dates of previous/current employment, work experience, Bureau of Workers Compensation/Claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offenders lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, credit history, civil cases, OIG/GSA, USA PATRIOT Act/OFAC, any sanction lists, FBI finger printing, internet searches, social media information, and drug testing. Upon Request, Embark Safety LLC will supply a copy of the completed consumer report along with a copy of an individual's rights under the Fair Credit Reporting Act.

## Authorization and Release

I \_\_\_\_\_, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation, or public agency may have. I authorize the full release of the information described above, without any reservation, throughout any duration of my employment at \_\_\_\_\_ (company name). I hereby release Embark Safety LLC, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family or associates because of compliance with this authorization for release form. I certify that all information provided below is correct to the best of my knowledge. This authorization and consent shall be valid in original, fax, or copy form. The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

Applicant's First Name

Middle Name

Last Name (print legibly)

Maiden/AKA/Previous Name(s)

Date of Birth (This will not affect hiring decision)

Drive License Number

State

(Month)

(Day)

(Year)

☐ \*\*\*California, Minnesota, Massachusetts, Maine and Oklahoma Applicants: please check this box to have a copy of your report emailed directly to you:  
email: \_\_\_\_\_ \*\*\*

**Notice to California Applicants:** Under section 1786.22 of California Civil Code, you have the right to request from Embark Safety LLC, upon proper identification, the nature and substance of all information in files pertaining to you, including the sources of information, and recipients of any reports on you, which Embark Safety LLC has previously furnished within the two-year period preceding your request. You may view the file maintained on you by Embark Safety LLC during normal business hours. You may also obtain a copy of this file upon submitting proper identification. Upon making a written request, you may receive a summary of your report.

**Notice to Maine Applicants:** Under Chapter 210 Section 1314 of Maine revised Statutes, you have the right, upon request, to be informed within 5 business days of such a request to whether or not an investigative consumer report was requested. If such report was obtained, you may contact the Consumer Reporting Agency and request a copy.

**Notice to Massachusetts Applicants:** Under Mass. Ann. Laws chapter. 93 §§ 50, a Consumer Reporting Agency may furnish a report if intended to be utilized for employment purposes.

**Notice to New York Applicants:** Under Article 25 Section 380-c (b) (2) of the New York General business Law, you have the right, upon written request, to be informed of whether or not an investigate consumer report was requested. Under Article 25 Section 380-g of the New York General Business Law, should a consumer report received by an employer contain criminal conviction information, the employer must provide to the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

Please initial here to acknowledge receipt of Article 23-A of New York Correction Law \_\_\_\_\_

Signature

Date

Electronic signatures are NOT acceptable. This document must be physically signed by applicant.