



APPLICATION FOR EMPLOYMENT

GHX INDUSTRIAL, LLC/MCCARTY EQUIPMENT CO, LTD IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE AGAINST APPLICANTS OR EMPLOYEES BASED ON RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, AGE, CITIZENSHIP, DISABILITY, MILITARY STATUS OR CHARACTERISTICS PROTECTED BY APPLICABLE LAW. APPLICANTS WHO REQUIRE REASONABLE ACCOMMODATION TO COMPLETE THE APPLICATION AND/OR INTERVIEW PROCESS SHOULD NOTIFY HUMAN RESOURCES.

PERSONAL INFORMATION

are applying:___

Name (Last)		(First)		(Middle Initial)	Date		
Address (Mailing Address)		(City)	(City)		(Zip)		
E-Mail Address			Home Phon	e -	Cell Phone		
POSITION							
Position App	lying For:						
-	o perform the functions of the job for w entified in the job description, if one ha ons?				☐ Yes ☐ No		
Are you eigh	teen years of age or older?				Yes No		
(If offered a pos	Are you legally authorized to work in the United States? (If offered a position by GHX Industrial, LLC, you will be required to provide documentation that proves your identity and employment eligibility).						
	er been convicted of a crime (excludi	ing minor traffic violatio	ns)?		☐ Yes ☐ No		
sentence, fine All relevant cir	complete details, including the date of complete details, including the date of complete details, or some comments and the complete details.	imilar disposition. Conviction occurred and the	tion of a crin	ne is not an absolu	ute bar to employment.		
EDUCATIO	DN						
	Name & Location of School	Course of Study o	r Major	# of Years Completed	Diploma / Degree		
High School							
College							
Graduate							
Vocational							
List any othe	r skills that you may possess includir	ng computer software sl	kills that qu	alify you for the	job for which you		





WORK HISTORY

List all employers for whom for each period of employme last 10 years.	you have ent of one	worked over the last 10 y month or more. If you w	years starting vere self-emplo	vith the mos yed, please	st recent employe indicate. Do not	er. Furr omit ar	nish dates and ex ny employment d	planations uring the
Employer			Telephone N	umber () -		From (Month/	(ear)
Address								
Job Title							To (Month/Yea	ır)
Specific Duties			I				1	
							Salary	
							Supervisor	
Reason For Leaving					May We Contac	t This E	Employer? Ye	es 🗌 No
Employer			Telephone N	umber () -		From (Month/	rear)
Address								
Job Title Specific Duties							To (Month/Yea	ır)
							Salary	
							Supervisor	
Reason For Leaving					May We Contac	t This E	 Employer? ☐ Ye	s 🗌 No
Employer			Telephone N	umber () -		From (Month/	(ear)
Address							To (Month No.	\
Job Title Specific Duties							To (Month/Yea	ir)
							Salary	
							Supervisor	
					T			
Reason For Leaving					May We Contac	t This E	Employer? 🗌 Ye	es 🗌 No
OTHER POSITIONS								
Position Held Dates		Dates	Er	Employer / Organization			Location	
WORK REFERENCE	ς		1					
					1	_	.1.11	Years
Name		Address		P	hone	R	elationship	Known
								+





Emergency Contact Name:	Phone Number:

CERTIFICATION AND INFORMATION TO APPLICANT

"I certify that I completed this application and that all facts and information provided by me are true and complete to the best of my knowledge. I understand that any misstatement, omission, falsification, or factual misrepresentation in this application shall disqualify me from consideration for employment by GHX Industrial, LLC/McCarty Equipment Co, LTD (GHX) or, if hired, result in disciplinary action up to and including termination of employment.

I authorize GHX to evaluate me for employment purposes and to verify any and all information furnished by me, or other information that may be disclosed about me, during the evaluative process. In addition, I authorize GHX to contact all law enforcement agencies; any or all of my previous employers, references, and educational institutions; an otherwise to fully investigate my suitability for employment, character, general reputation, personal characteristics, mode of living, work habits, skills, or abilities, including contacting a credit bureau, credit agency, or other consumer reporting agencies of its choice. I understand that the results of any such investigation may be disclosed to GHX management personnel and other personnel involved in the employment decision, and I consent to such disclosure. I also consent to the disclosure of such information as may be required by law. In connection with and in consideration of GHX's undertaking to review my application for employment, to conduct the investigation, and to consider me for hire, I release, waive, indemnify, and hold harmless GHX, and its affiliates, representatives, consultants, officers, directors, managers, supervisors, employees, and agents from and against any and all liabilities, losses, demands, claims, or suits for any injury or damage, of any kind, character, or nature. INCLUDING THOSE FOR ANY INJURY OR DAMAGE RESULTING FROM NEGLIGENCE WHETHER SOLE CONCURRENT OR GROSS that is or is alleged to be caused by or contributed to by GHX, and that I may suffer or sustain as a result of the creation, acquisition, dissemination, or use of any such information.

I acknowledge and agree that this employment application is not a contract or a legal guarantee of employment. If hired by GHX, I understand that my employment will be at will and not for any specific term, and that either I or GHX may terminate my employment at any time, with or without reason or advance notice. I further understand that no officer, director, supervisor, employee, or representative of GHX, other than the President, has the authority to enter into any agreement for a specified period of employment, or to make any statement contrary to the provisions outlined above.

If hired, I agree to comply with all rules, regulations, and operating procedures established by GHX, including but not limited to all rules of conduct. I further agree that I will not disclose, directly or indirectly, during the term of my employment or thereafter, any proprietary or confidential information of the Company's trade secrets, to any person, firm, or corporation or use such information other than in the course of my employment with the Company. I further agree that I will honor any presently effective secrecy agreement with former employers. GHX assures that I am not and will never be required as a condition of employment to disclose any confidential information, technical know-how or trade secrets of a proprietary nature of any former employer and I agree not to disclose any such information, know-how or trade secrets to GHX.

I have read in full and understand the above statements and con	ditions of employment."		
Applicant Signature	Date		





BACKGROUND INVESTIGATION DISCLOSURE AND AUTHORIZATION FORM

In connection with your application for employment and, if hired, your continued employment, GHX Industrial, LLC/McCarty Equipment Co, LTD (GHX) has contracted with a consumer reporting agency to obtain consumer reports or investigative consumer reports that contain information about your employment history, educational background, criminal history (if any), character, general reputation, personal characteristics, mode of living, work habits, skills, abilities, and/or interactions with other employees. GHX may use the reports to make decisions concerning your application for employment and, if hired, your suitability for promotion, transfer, reassignment or retention as an employee; GHX will provide you with a copy of the report, along with information necessary to contact the consumer reporting agency and a summary of your rights under the Fair Credit Reporting Act (FCRA).

Should GHX procure any investigative consumer report, you are entitled under federal law to request in writing a disclosure of the nature and scope of the investigation requested, along with a written summary of your rights under the FCRA.

Should GHX procure any investigative consumer report, you are entitled under federal law to request in writing a reports, criminal records checks, court records checks, and/or summaries of educational and employment records and histories, either in connection with your job application, or in connection with any future decisions concerning your employment, promotion, reassignment or retention as an employee of GHX. You further grant GHX the authority to verify all information you have provided to GHX. You also authorize all entities having information about you, including present and past employers, criminal justice agencies, departments of motor vehicles, schools, and credit reporting agencies to release such information to GHX or any firm retained by GHX to conduct employee investigations.

To ensure that the consumer reporting agency obtains information pertaining to you and not to another person with the same or similar name, please provide the information requested below. The information that you provide is NOT part of the employment application, and will be used only to verify the information furnished by you during the hiring process. Please complete all of the requested information.

This authorization shall remain valid and in effect during the term of your employment. We reserve the right to run subsequent consumer reports and/or investigative consumer reports on an as-needed basis. A photocopy of this Authorization form shall be considered as effective and valid as the original.

Full Legal Name Last	First	Middle	
Street Address	City	State	Zip
Social Security Number	Birth Date	Drivers License	State
List any other names you have used:			
List any other Social Security Numbers you	have used:		
States and Counties of Residence for the pa	st seven years:		
Applicant Signature		Date	

^{*}The consumer reporting agency requires this information to verify criminal history (if any). The Age Discrimination in employment Act of 1967 prohibits discrimination on the basis of age.