



601 Mizpah Church Road, Reidsville, NC 27320

336-342-3642

Electricssystem.com

EMPLOYMENT PACKET

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- Employment Application
- Drug & Alcohol Policy with Acknowledgment Form
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ElectricSYSinc.com

GENERAL INFORMATION

Thank you for your interest in working for Electric Systems, Inc. We have been in business since 1981 as an industrial electrical contractor. We are licensed to work in North Carolina, South Carolina, Virginia, Georgia, Alabama, Florida, Ohio, Maryland, Louisiana and Texas. We primarily do work in North Carolina and Virginia but there are occasions where our employees will have to go to other states to perform tasks required by our customers.

As an electrician's helper, electrician apprentice or electrician, you will be expected to perform work associated with the trade. This may include being able to work on ladders, scaffolds, manlifts, and bucket trucks.

Because we are a service organization, and in order to accommodate our customers, we sometimes perform work on weekends, nights and holidays. Working hours may vary depending on job location. Normal working hours are (4) 10 hours days, Monday-Thursday. Most employees meet at our office and travel in company vehicles to the job locations.

Safety is a top priority and you will be expected to follow the safety policies of Electric Systems, Inc. and our customers **always**. You will be provided a red safety bag with safety equipment.

We offer many benefits to our employees after 60 days of employment following the first of the next month. These include: Health, Dental, Vision, Life, Short- and Long-term disability. After six months of service you will be eligible for holiday pay, double time pay for holidays and Christmas bonus.

If you have any questions, please contact Roy Southard, President or Dawn Stanley, Treasurer/Secretary at 336-342-3642.



ELECTRIC SYSTEMS, INC.

P. O. Box 2251

REIDSVILLE, N. C. 27323-2251

(336) 342-3642

EMPLOYMENT APPLICATION

It is the policy of Electric Systems, Inc. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

Applicant Name: _____
Address: _____
City/State/Zip: _____
Number of years at this address: _____
Daytime phone: _____ Evening phone: _____
Cell Phone: _____

Social Security Number: _____

Who should be contacted if you are involved in an emergency?

Contact Name: _____
Relationship to you: _____
Address: _____
City/State/Zip: _____
Daytime phone: _____ Evening phone: _____
Job Position Applied For: _____

Referral Source: Who referred you to our company?

Have you applied to our company previously? Yes No

If yes, when? _____

Are you at least 18 years old? Yes No

How will you get to work? _____

Driver's License Number: _____

What state issued your license? _____

Are you willing to work any shift, including nights and weekends? Yes No

Are you willing to work out-of-town? Yes No

If you are offered employment, when would you be available to begin work?

Are you legally eligible for employment in the United States? Yes No

Are you able to perform the essential functions of the job position with or without reasonable accommodation? _____ Yes _____ No
What reasonable accommodation, if any, would you require?

Have you ever been convicted of any crime, including traffic violations?
_____ Yes _____ No If yes, please describe:

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

Applicant Employment History: List your current or most recent employment first.

Employer Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Applicant's Education and Training: List your education and training.

High School Name and Address

Last Grade? _____ 9 _____ 10 _____ 11 _____ 12 Diploma? _____ Yes _____ No

College Name and Address

Did you receive a degree? _____ Yes _____ No If yes, degree received: _____

Other Training (graduate, technical, vocational):

Awards, Honors, Special Achievements:

Applicant's Skills: List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability or Skill

Years of Experience

References: List any two people who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
Relationship: _____

Please provide any other information that you believe should be considered:

CERTIFICATION

I certify that the information provided on this Application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my Application, or if employment commences, immediate termination.

I authorize Electric Systems, Inc. to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

***I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND
AND AGREE TO ITS TERMS.***

APPLICANT SIGNATURE

DATE


Office Use Only

Drug Test Date: _____ Results: _____

Start Date: _____

Pay Rate: _____

Notes: _____

	Electric Systems, Inc. Safety Management System	Doc No:	Non-DOT DA
		Initial Issue Date:	6/1/2015
NON-DOT DRUG & ALCOHOL POLICY - US		Revision Date:	Initial Version
		Revision No.:	0
		Next Review Date:	6/1/2016
Preparation: Safety Mgr	Authority: President	Issuing Dept: Safety	Page: Page 4 of 4

DRUG AND ALCOHOL POLICY ACKNOWLEDGEMENT FORM

I acknowledge that I have been provided a copy of the Electric Systems, Inc. Non-DOT Drug and Alcohol Policy requirements. I understand that disciplinary action, up to and including termination, will result if I violate this policy.

Employee Signature

Date

Employee Printed Name

Social Security Number (last 4 digits)

CONSENT AND AUTHORIZATION FOR DISCLOSURE TO CLIENTS OF ELECTRIC SYSTEMS, INC. OF ALCOHOL AND DRUG TEST RESULTS AND RELATED INFORMATION


I hereby consent to disclosure by Electric Systems, Inc. and its agents, including, but not limited to, any collecting and testing agencies, of the test results identified above and any related information to clients of Electric Systems, Inc. and its authorized agents, assigns, or representatives.

Employee Signature

Date

Employee Printed Name

Social Security Number (last 4 digits)

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Scope

This policy is applicable to all Electric Systems, Inc. employees. If subcontractors are used they are required to comply with their company policy that must equal or exceed this program.

Testing Requirements

Pre-Employment/Post-Offer Testing of Individuals

Drug and alcohol testing will be given to all individuals prior to employment. Testing must be given before initial assignment.

Random Drug and Alcohol Testing

Drug and alcohol testing will be administered at random times. Employees will be chosen through an unbiased selection process.

Drug and Alcohol Testing for Reasonable Cause as Determined by a Company Official (or Other Person Considered Competent)

If a company official or competent person has determined that there is reasonable cause or suspicion that an individual is performing work under the influence, then that individual will be required to submit to a drug and alcohol test.

Post Incident Testing

Electric Systems, Inc. shall administer drug and alcohol tests to any employees involved in a work-related incident. All employees involved in a work-related incident will be required to submit to a drug and alcohol test.

Drugs Being Tested For


The names of the drugs being tested for include:

- Marijuana
- Cocaine
- Opiates
- Amphetamines
- Phencyclidine

Records

Electric Systems, Inc. must ensure that it will maintain appropriate records for as long as we have a contract with a client and then for 3 years after the termination of the contract. Examples include:

- Chain of custody forms
- Alcohol testing forms
- Signed acknowledgment/consent forms

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Policy

Any employee or subcontractor on duty or on Electric Systems, Inc. property who possesses, sells, receives, is impaired or is determined to have measurable levels of any alcohol or illegal drug in their blood or urine (no matter the amount), post drug/alcohol screen, will be subject to immediate disciplinary action or contract dismissal.

We have a Zero Tolerance policy. ANY violation to the policy will result in the permanent removal of the employee from Electric Systems, Inc. or our client's premises. Electric Systems, Inc. does not have a return to duty process and any employee or subcontractor violating this policy will be permanently banned from Electric Systems, Inc. or client property.

Drug and alcohol testing will be performed when there is reasonable suspicion or reasonable cause to suspect the employee of being under the influence of a prohibited substance. The employee(s) or subcontractor(s) removed for reasonable cause testing will not be allowed to return to work until receipt of a negative drug and alcohol test is received.

Alcohol testing must be performed by a breath, blood or saliva (with breath confirmation) test.

Drug and alcohol testing will be performed after an accident or incident.

Employees receiving unacceptable test results will not be allowed to work on Client/Host sites or facilities. Any employee that receives unacceptable drug and alcohol test results will not be allowed to work on a Client/Host site or facility.


If an employee or subcontractor returns to work following an absence of more than 90 days a return to work screening shall occur. Follow up drug screening shall be applied when appropriate as determined by management.

Electric Systems, Inc. must ensure that all employees who will be working on our client's jobsite must have received a negative result on a drug within the past 12 months.

Electric Systems, Inc. prohibits the misuse of prescription or over the counter medications. Some types of medications could have undesirable effects, and these can create a safety risk and endanger the employee and others. Employees must notify his/her supervisor if taking a medication that might impair their ability.

Periodically, unannounced inspections will be made of persons entering or leaving Electric Systems, Inc. work sites by authorized Electric Systems, Inc. representatives. Entry onto Electric Systems, Inc. or client property is deemed to have provided consent to an inspection of a person, locker, vehicle or any other personal effects. Our clients have the right to conduct unannounced searches of your personnel and property and any employee who refuses to cooperate with the searches shall be removed from our clients' property.

Any refusals to submit to a drug/alcohol screen will be treated as a positive test, resulting in immediate contract dismissal or disciplinary action, up to and employment termination. The subcontractor or employee refusing to

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submit to the test will be asked to sign a refusal document. If they refuse to sign the document, it will be noted and kept on file.

All results are treated with confidentiality. The switching or adulterating any urine, blood or any other samples is a violation of this policy.

If another subcontractor or employee comes to management with concern regarding another subcontractor or employee in reference to alcohol or substance abuse, we will treat that with discretion and confidentiality. We will pursue investigation and decide accordingly whether a drug and or alcohol screen is the appropriate step to take.

All subcontractors and employees are subject to the policies explained above.

This policy is to be posted in all facilities by the site supervisor.



NORTH CAROLINA
DIVISION OF MOTOR VEHICLES
DRIVER LICENSE SECTION



Driver Privacy Protection Act Authorization
To Disclose Personal Information Form DL-DPPA-2

I understand that personal information contained in my Motor Vehicle Record is protected by the federal Driver Privacy Protection Act and N.C. General Statute 20-43.1. I hereby authorize the release of my personal information to the person named below.

Print your full name as it appears on your driver license

Your signature (MUST BE SIGNED)

Your N.C. driver license number, SSN or ITIN & date of birth

Date signed

Person to receive information: Electric Systems, Inc.

Mailing address: 601 Mizpah Church Road, Reidsville, NC 27320

Fees: Certified Complete History - \$14.00 Uncertified Complete History - \$10.00 Uncertified Limited History - \$10.00
ESI will pay the cost

Circle one of the above to indicate the type of MVR to be released. Make checks payable to "NCDMV".
Mail this form and fees to: NCDMV, Driver License Records, 3113 Mail Service Center, Raleigh, NC 27697-3113, *please allow 10 business days processing time, this does not include US Postal service delivery time to or from the DMV.*

Form DL-DPPA-2, Revised May 2018
Previous editions are obsolete, DO NOT USE

ACKNOWLEDGMENT AND AUTHORIZATION FOR BACKGROUND CHECK

I acknowledge receipt of the separate stand alone Disclosure and certify that I have read and understand it and this authorization. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by ELECTRIC SYSTEMS, INC. at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **IntelliCorp Records, Inc., 3000 Auburn Drive, Suite 410, Beachwood, Ohio 44122; Tel. No. 1.888.946.8355; www.intellicorp.net**.

I do _____ do not _____ authorize you to contact, through IntelliCorp Records, Inc., my current employer for Employment and Reference Verifications. (*Checking "I do" will authorize inquiries to the Human Resources Department and to any listed supervisors.*)

I also consent to have any legally required notices sent electronically.

Printed Name

Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date

PERSONAL DATA

Last Name

First Name

Middle Name

Current Address

Dates Lived Here

Date of Birth

Other Names Used (including maiden name)

Years Used

Social Security Number

Driver's License #

DL State

Email address (may be used for official correspondence)

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer

reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

You have a right to place a “security freeze” on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is

placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact: