

Yes No Have you read the job description or had the requirements of the job explained to you?

Yes No Do you understand these requirements?

Yes No Can you perform the requirements of this job with or without reasonable accommodation?

To the extent, you believe you will need accommodation to perform the requirements of the job that you are applying for, please list the specific accommodations necessary to perform those job functions.

Please list any other skills, licenses, or certificates that may be job-related or that you feel would be of value to this job or company.

CONDITIONS OF EMPLOYMENT

As a condition of employment, I agree to follow:

1. I will observe and comply with all MM (Manning Masonry, Inc.'s) policies included in the Field Employee Handbook and Safety Manual
2. If I am unable to report for work for any reason, I will notify my Jobsite Superintendent. If I am unable to contact same, I will notify the MM office closest to me. The above notification will be made as soon as possible before the pending absence but not later than the normal starting time or the work being missed.
3. I recognize the voluntary nature of the employment relationship. I also understand and agree that certain types of conduct may result on discipline or discharge from employment, based upon my employer's sole discretion. Examples of such behavior include, but are not limited to:
 - a) Willful disregard of my employer's interest including any false statements on this application.
 - b) Insubordination/ failure to obey orders.
 - c) Dishonesty, fighting on jobsite, or other improper conduct.
 - d) Reporting under the influence of alcohol or illegal drugs or the use of same while on the MM jobsite. (This includes any traveling in an MM vehicle)
 - e) Defective and improper work.
 - f) Destruction of company property.
 - g) Violation of safety rules.
 - h) Any unreported absence. (See No. 2 above)
 - i) Tardiness.
4. Due to the nature of construction work and the location of projects, I agree to furnish my own transportation and/or traveling expenses to and from the MM, jobsite. I further agree as a condition of employment to willingly transfer from jobsite to jobsite or from area to area as instructed by MM, or voluntarily, terminate my employment. I understand that the basis of these transfers is to assist my employer in his tasks of properly manning his jobs as the work becomes available on the various projects under construction. I further understand that the wage rates will vary with the prevailing rates for the different rates.
5. If I am injured while working for MM, I will notify my Jobsite Superintendent immediately.
6. I or my designed representative have a right of access to relevant exposure and medical records as stated in OSHA Standard 1926.33.
7. I fully understand and agree that upon payment of such wages or salary as may have been earned, you may terminate my employment with assuming any further liability.

RETURN-TO-WORK-POLICY:

In the event you would sustain an injury on-the-job and are given restriction to your normal work duties, we will offer LIGHT DUTY/MODIFIED WORK until you are released to full duty status.

CERTIFICATION AND RELEASE: I certify that I have read and understand this application along with the description of the job for which I am applying and that the answers given by me to the foregoing questions and that statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents, including consumer reporting bureaus, to verify a y of this information including, but not limited to, motor vehicle driving records. I authorize all persons, schools, companies, and law enforcement authorities to release any information concerning my damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

In consideration of employment by Manning Masonry, Inc. I agree, as shown on the reverse side of this form, that I am capable of performing the job duties of the position I am applying for and agree to all conditions of employment. I understand that my employment relationship is voluntary in nature and that unless I have an executed written contract or employment signed on behalf of Manning Masonry, Inc. by its president, I have at all times the right to terminate the employment relationship, as does my employer, with or without cause.

Signature: _____ Date: _____