

UL Application for Employment



TO OUR APPLICANT: — We appreciate your interest in seeking employment with UL and assure you that we are sincerely interested in pursuing your application for employment. A clear understanding of your skills and work history will aid us in considering you for the position for which you are applying. When completed, this application will remain active for a period of six months. After that period of time, your application will become inactive, but you may renew your interest in UL by completing a new application form.

UL complies with the Immigration Reform Act of 1986 under which we are required to verify your legal identity and legal right to work in the U.S.A. if you are hired. UL also complies with the Civil Rights Acts of 1964 and 1991 and implementing legislation, both Federal and State, which prohibit discrimination in employment related decisions because of a person's race, color, creed, sex, national origin, marital status, disability or age. However, certain laws require that we only employ persons who meet legal age requirements for certain positions. In addition, UL maintains compliance with the provisions of the Americans with Disabilities Act of 1990, and the regulations promulgated thereunder. To assist us in implementing that Act we will need to determine your ability to perform the essential functions of the position for which you are being considered. Your truthful and honest response as to whether you have the ability to perform essential job functions, with or without reasonable accommodation, will aid UL in identifying possible reasonable accommodations which may assist in your job performance.

GENERAL INFORMATION					
NAME (LAST, FIRST, MI)				PHONE NUMBER	
PRESENT ADDRESS (NUMBER AND STREET)					
CITY		STATE		ZIP CODE	
POSITION APPLIED FOR			SALARY EXPECTED PER		IF PART-TIME, SPECIFY DAYS AND HOURS OF AVAILABILITY
HAVE YOU EVER BEEN EMPLOYED BY UL? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, POSITION:			DATE(S) OF HIRE
HOW DID YOU HEAR OF UL?		NEWSPAPER AD (SPECIFY PAPER)		EMPLOYEE (SPECIFY NAME)	
DO YOU HAVE ANY RELATIVES CURRENTLY WORKING AT UL? <input type="checkbox"/> YES <input type="checkbox"/> NO					
IF YES, PLEASE SPECIFY:					
<u>NAME</u>		<u>RELATIONSHIP</u>		<u>LOCATION/DEPARTMENT</u>	
EDUCATION					
CHECK YEARS OF SCHOOL COMPLETED: GRAMMAR <input type="checkbox"/> 8 HIGH <input type="checkbox"/> 12 COLLEGE <input type="checkbox"/> 16 GRADUATE <input type="checkbox"/> 17					
HIGH SCHOOL	NAME OF SCHOOL		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
	ADDRESS		CURRICULUM		
JUNIOR COLLEGE	NAME OF SCHOOL		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
	ADDRESS		TYPE OF DEGREE		MAJOR MINOR
UNDER-GRADUATE	NAME OF SCHOOL		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
	ADDRESS		TYPE OF DEGREE		MAJOR MINOR
GRADUATE	NAME OF SCHOOL		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
	ADDRESS		TYPE OF DEGREE		MAJOR MINOR
OTHER JR. COLLEGE <input type="checkbox"/> UNDERGRAD <input type="checkbox"/> GRADUATE <input type="checkbox"/>	NAME OF SCHOOL		GRADUATE <input type="checkbox"/> YES <input type="checkbox"/> NO		
	ADDRESS		TYPE OF DEGREE		MAJOR MINOR
IF YOU SPEAK ANY FOREIGN LANGUAGES, PLEASE SPECIFY: _____					
LIST JOB RELATED ACTIVITIES OR HONORS: (YOU MAY EXCLUDE THOSE THAT INDICATE RACE, COLOR, RELIGION, SEX, OR NATIONAL ORIGIN.)					

EMPLOYMENT HISTORY (List previous employment starting with latest position.)

NAME OF COMPANY					ADDRESS		
CITY					STATE	TELEPHONE NO.	NAME AND TITLE OF LAST SUPERVISOR
DATES OF EMPLOYMENT	MO.	YR.	MO.	YR.	STARTING SALARY	ENDING SALARY	JOB TITLE
	FROM		TO				
DESCRIBE RESPONSIBILITIES AND HOW LONG YOU PERFORMED EACH							
REASON FOR LEAVING							
NAME OF COMPANY					ADDRESS		
CITY					STATE	TELEPHONE NO.	NAME AND TITLE OF LAST SUPERVISOR
						()	
DATES OF EMPLOYMENT	MO.	YR.	MO.	YR.	STARTING SALARY	ENDING SALARY	JOB TITLE
	FROM		TO				
DESCRIBE RESPONSIBILITIES AND HOW LONG YOU PERFORMED EACH							
REASON FOR LEAVING							
NAME OF COMPANY					ADDRESS		
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DATES OF EMPLOYMENT	MO.	YR.	MO.	YR.	STARTING SALARY	ENDING SALARY	JOB TITLE
	FROM		TO				
DESCRIBE RESPONSIBILITIES AND HOW LONG YOU PERFORMED EACH							
REASON FOR LEAVING							
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CITY					STATE	TELEPHONE NO.	NAME AND TITLE OF LAST SUPERVISOR
DATES OF EMPLOYMENT	MO.	YR.	MO.	YR.	STARTING SALARY	ENDING SALARY	JOB TITLE
	FROM		TO				
DESCRIBE RESPONSIBILITIES AND HOW LONG YOU PERFORMED EACH							
REASON FOR LEAVING							

OTHER INFORMATION RELEVANT TO YOUR APPLICATION FOR EMPLOYMENT

1. Do you have a Professional Engineer's License or other legally required professional registration? ☐ Yes ☐ No
- 1a. If yes, in what state(s) are you registered? _____
- 1b. If no, have you successfully completed Part I of the P.E. Examination or other examination required for registration?
- ☐ No
- ☐ Yes (in what state?) _____
- 1c. Please list below other professional accreditations, licenses or certifications relevant to the position for which you are applying:
- _____
- _____
2. Federal and State regulators prohibit employment of persons under the age of 18 in positions that are considered to be hazardous. As UL has positions of this nature:
- Are you currently age 18 or older? ☐ Yes ☐ No
3. Are you legally eligible for employment in the United States? Under the Immigration Reform and Control Act, you will be required to fill out a certification verifying that you are eligible to be employed and verifying your identity. Further, you will be required to provide documentation to that effect. ☐ Yes ☐ No
4. Do you now or will you in the future require sponsorship for employment visa status (e.g., H-1B, OPT, TN, etc.)? ☐ Yes ☐ No

CERTIFICATION

PLEASE READ CAREFULLY BEFORE SIGNING

1. If I am offered and I accept UL employment, I understand that:
- 1a. My offer of employment is contingent upon my successful completion of a background investigation that includes verification of employment, education, and criminal history as well as 2) any motor vehicle record check or physical examination that may be required by the position for which I am applying. All of the results must be acceptable to the company. All information obtained from any of these pre-employment verifications and tests will be maintained in the strictest confidence, including any physical examination results which will be maintained on file separate from my personnel file.
- If, due to unusual circumstances, I am employed before such verifications are completed and if the results are unacceptable to UL, I understand that my employment may be terminated immediately.
- 1b. My offer of employment is also contingent upon my signing a separate confidentiality agreement.
2. If I am employed:
- 2a. I understand that, in some states, the law requires that UL have my written permission before obtaining consumer reports on me and, if such reports are needed by UL as part of my employment, I hereby authorize UL to obtain them.
- 2b. I agree that I will not accept "outside" or supplementary employment that could potentially result in a conflict of interest, without first discussing the supplementary employment with my supervisor and obtaining a determination that such employment would not constitute a conflict of interest detrimental to the best interests of UL.
3. I certify that to the best of my knowledge, the information I have recorded on this application is correct and complete. I realize that misrepresentation or omissions of information recorded by me on this application will be cause for rejection of this application or for termination of employment, if discovered after my employment begins.

Date

Signature of Applicant