

Form

Document 6-840/23 Last Revised 8/25/2023

			Concorde Specialty Gases, Inc.		
	Applic	ant Information			
Full Name:			Date:		
Address:			Apartment/Unit #		
City		State	Zip Code		
Cell Phone: Email:					
Position Applied For:		Date Available:			
Are you authorized to work in the United States?	Yes	No			
Have you ever worked for this company?	Yes	No			
If yes, when? Have you ever been convicted of a felony?	Yes	No			
If γes, explain:					
		Education			
High School:	Yes				
Did you graduate?		No Diploma:			
College:		Address:			
Did you graduate?	Yes	No Degree:			
Other:					
Did you graduate?	Yes	No Degree:			
References					
Please list three professional references.					
Full Name:			Relationship:		
Company:			Phone:		
Address:					

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Full Name:		
Address: Full Name: Company:		_ Relationship:
Address:	Previous Employment	
Company: Address: Job Title:		Supervisor:
Responsibilities: To: From: To: May we contact your previous supervisor for a re	Reason for Leaving: Yes No	
Company: Address: Job Title:		Phone: Supervisor: Ending Salary: \$
Responsibilities: To: From: To: May we contact your previous supervisor for a re	Reason for Leaving: Yes No	
Company: Address: Job Title:		Supervisor:
Responsibilities: To: From: To: May we contact your previous supervisor for a re	Reason for Leaving: Yes No	



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Military Service				
Branch:	From: To:			
Rank at Discharge:	Type of Discharge:			
If other than honorable, explain:				
Disclaimer and Signature I certify that my answers are true and complete to the best of my knowledge.				
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release:				
Signature	Date:			



Job Application

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CONSENT FOR PRE-EMPLOYMENT, RANDOM, OR REASONABLE SUSPICION DRUG TEST SCREEN AND RELEASE COVENANT NOT TO SUE AND INDEMNITY AGREEMENT

I hereby CONSENT to allow (Meridian Occupational Health and/or an accredited Third-Party Administrator) to take a specimen of my hair, urine, or blood and submit it for a pre-employment, random, or reasonable suspicion drug test screen and/or perform a full pre- employment physical. I FURTHER CONSENT to allow the laboratory testing service to make the results of such screen available to the prospective or current employer, Concorde Specialty Gases Inc.

In consideration for such services being rendered on my behalf, I hereby RELEASE the laboratory testing service, its officers, agents, and employees, from any and all claims which I might otherwise have due to such results being made so available. I hereby CONSENT NOT TO FILE ANY ACTION at law or in equity against Concorde Specialty Gases Inc., the laboratory testing service, their respective officers, agents or employees in connection with the results of such screen being made so available, and I hereby agree to INDEMNIFY and SAVE HARMLESS Concorde Specialty Gases Inc., the laboratory testing service, their respective officers, agents, and employees from all damages, expenses, reasonable attorney's fees, and costs of court which they or any of them may suffer or incur, jointly or severally, due to the results of such screen being made so available.

SIGNED this ______ day of ______, 20____.

Signature of Employee/Applicant____