



EEO Candidate Voluntary Self-Identification

SDI La Farga believes that all persons are entitled to equal employment opportunities and we do not discriminate against our employees, applicants, or job seekers because of race, color, religion, creed, sex, sexual orientation, gender identity or expression, national origin, genetics, age, marital or veteran status, the presence of handicaps or disabilities or any other protected group status as defined by the laws. In order to comply with the laws, we invite you to voluntarily self-identify your race/ethnicity and gender.

Please complete the information below which includes the option to choose not to self-identify.

This information will be kept confidential and separate from the application for employment. Your submission of this information is entirely voluntary and refusal to provide it will not influence our screening or hiring process.

Invitation To Self-Identify

Name _____

Position Applying For _____

Location/Division _____

I do not wish to complete the information requested below.

PLEASE ANSWER THE FOLLOWING QUESTIONS

What is your gender? You may mark **only one** box.

Male

Female

What is your race/ethnicity? You may mark **only one** box.

Hispanic or Latino: a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

White (Not Hispanic or Latino): a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino): a person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino): a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino): a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino): all persons who identify with more than one of the above five races.

What is your Veteran status? Mark **all** that apply.

Not Applicable

Recently Separated Veteran

Vietnam Era Veteran

Other Protected Veteran

Armed Forces Service Medal Veteran

Applicant's Signature

Date



APPLICATION FOR EMPLOYMENT

SDI La Farga is an equal opportunity employer. Applicants are considered for employment without regard to race, color, religion, creed, sex, sexual orientation, gender identity or expression, national origin, genetics, age, marital or veteran status, the presence of handicaps or disabilities, or any other basis prohibited by law, unless such basis constitutes a *bona fide* occupational qualification. SDI La Farga will comply with its legal obligation to provide reasonable accommodation to qualified individuals with disabilities. An accommodation is also available for seeking a job at SDI La Farga. If you need an accommodation to complete this application or pursue a job at SDI La Farga, please contact the SDI La Farga representative who provided the application to you.

Applications shall be kept active for 180 days.

PLEASE PRINT

Date of Application _____

Name _____
LAST FIRST MIDDLE

Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone Daytime: (____) _____ Evening: (____) _____

Email Address (Optional): _____

Are you available to work Full-Time Part-Time Temporary
(Check all that apply) On-Call Overtime Any Shift
 12-Hour Rotating Shift (4 days on/4 days off, rotating between day shift & night shift)

On what date would you be available for work? _____

Are you on layoff and subject to recall at another employer? Yes No

Have you filed an application with SDI La Farga before? Yes No If yes, provide date(s) and location(s):

Have you ever been employed by SDI La Farga or an affiliate before? (Examples: Steel Dynamics, OmniSource, New Millennium Building Systems, Superior Aluminum Alloys) Yes No If yes, provide date(s) and location(s):

Do you have any relatives employed by SDI La Farga? Yes No If yes, please list them by name, relationship and location:

Why did you apply for a position with SDI La Farga? _____

Why do you think you would make a valuable SDI La Farga employee? _____

Are you legally authorized to work in the United States? Yes No

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? Yes No

Are you 18 years or older? Yes No If not, are you able to furnish any required work permit? Yes No

Name of person to notify in case of emergency _____

Address _____ Emergency Phone Number _____

EDUCATION						
Type of School	Name of School	City and State	Number of Years Completed	Graduate?		Course Pursued/ Degrees Granted
				Yes	No	
High School						
College or University						
Business, Trade, Technical, or Correspondence School						
Other (Including Military Training)						

List any special job-related skills and qualifications acquired from education, employment, volunteer work or military service: _____

List any work-related certifications or licenses you currently possess: _____

List specific skills or office machines, tools, machinery or other equipment on which you are trained and can operate that could potentially be helpful in performing the responsibilities of the position(s) for which you are applying: _____

PERSONAL REFERENCES				
List the name, address and telephone number of three references who are not related to you.				
1.	_____	_____	_____	()
	Name	Address	Business & Position	Telephone No.
2.	_____	_____	_____	()
	Name	Address	Business & Position	Telephone No.
3.	_____	_____	_____	()
	Name	Address	Business & Position	Telephone No.

JOB-RELATED INFORMATION

NOTE: Before completing the following section, first determine whether you wish to apply for an "operations" position or an "administrative" position, or both.

For which job category or position are you applying? If more than one, please check the box by the job category or position that is your first preference.

- Operations Position _____ Salary/Wages expected: \$ _____
- Administrative Position _____ Salary/Wages expected: \$ _____

EMPLOYMENT RECORD

Starting with your present or most recent job, list all your employment experience for at least the last 20 years. You may include job-related military service assignments and volunteer activities that reflect your qualifications for employment.

Employer	Employment Dates	Kind of Work Performed:
	From	
Address	To	Reason for leaving:
Telephone ())	Salary/Hourly Rate	
Job Title	Starting:	
Immediate Supervisor:	Final:	
Employer	Employment Dates	Kind of Work Performed:
	From	
Address	To	Reason for leaving:
Telephone ())	Salary/Hourly Rate	
Job Title	Starting:	
Immediate Supervisor:	Final:	
Employer	Employment Dates	Kind of Work Performed:
	From	
Address	To	Reason for leaving:
Telephone ())	Salary/Hourly Rate	
Job Title	Starting:	
Immediate Supervisor:	Final:	
Employer	Employment Dates	Kind of Work Performed:
	From	
Address	To	Reason for leaving:
Telephone ())	Salary/Hourly Rate	
Job Title	Starting:	
Immediate Supervisor:	Final:	

If you need additional space for your Employment Record only, please continue on a separate sheet of paper.

May we contact the employers listed above? Yes No If no, indicate which one(s) you do NOT wish us to contact and state the reason why you prefer we do not contact the employer(s). _____

Have you ever been discharged or asked to resign from any prior position? Yes No If yes, please state the employer, dates of employment, and reason for discharge. _____

Which of your previous jobs have you liked best? _____

Why? _____

Which of your previous jobs have you liked least? _____

Why? _____

APPLICANT'S STATEMENT

(Please indicate that you have read and understand each paragraph of the Applicant's Statement by placing your initials beside each paragraph.)

Initials

_____ I certify that this application was completed by me and that all entries and information in it are TRUE and COMPLETE to the best of my knowledge. In the event of employment, I understand that false, misleading or omitted information in my application may result in discharge.

_____ I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I understand that an investigation may be made and information may be obtained through interviews with personal references and past employers, through a credit check, a criminal history check and/or a driver's record check. This inquiry may include information as to, among other things, my character, general reputation and personal characteristics, as well as information about my work performance and workplace conduct. I consent to this investigation and to the consideration of any statements of references, former employers or others that are given in response to the inquiry. If SDI La Farga decides to obtain a consumer credit report, I understand that SDI La Farga will provide, at my request, the name and address of the reporting agency so I may obtain from such reporting agency the nature and substance of information contained in such report.

_____ I hereby release all parties, including but not limited to SDI La Farga, personal references and previous employers, from liability for any injury or damage that may result from their furnishing information concerning me or any action SDI La Farga takes on the basis of such information.

_____ I understand that, if I am offered a job, as a condition of beginning my employment, I will be required to undergo a physical examination and must be able to perform the essential functions of the job with or without reasonable accommodation and will be required to pass a drug screen, as allowed by applicable law, and I hereby authorize any doctor, hospital, clinic, laboratory or other medical facility to furnish any medical information with reference to me as may be necessary in conjunction with that physical examination and drug screen and related considerations.

_____ I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.

_____ I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment is for no fixed period of time and is terminable at any time and for any reason by me or by SDI La Farga. I further understand that statements which may be contained in policies, practices, handbooks or other material do not create any guarantee of employment and that SDI La Farga has the right to modify, amend or terminate policies, practices, benefits plans or other programs within the limits and requirements imposed by law. I understand that no representative of SDI La Farga, other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing to be binding.

_____ I understand that, upon employment, I will sign an agreement relating to protecting confidential information, if required.

_____ I certify that I am not bound by any employment contract or non-competition agreement that would be breached by any employment that might be offered to me by SDI La Farga, nor am I in possession of nor will I at any time reveal to SDI La Farga, under any circumstances, any proprietary or confidential information that is the subject of any contract, non-disclosure agreement or prior work relationship involving any other person or entity.

_____ I hereby certify that, if employed by SDI La Farga, I will promptly report to my supervisor or Human Resources if I am ever harassed by someone related to my employment, and/or if I ever become aware of any unethical behavior by any employee of SDI La Farga.

_____ Date: _____
Signature of Applicant