



4700 N Westport Ave . Sioux Falls, SD 57107 . Phone: (605) 331-5267 . Fax: (605) 331-5821 . jccs@janscorp.com

NOTICE TO PROSPECTIVE APPLICANTS

Please read the following information <u>BEFORE</u> you complete an application to work for Jans Corporation. If you agree to comply with the items below, you must sign this form and return it to the office prior to your being considered for employment by Jans Corporation.

Working Hours – Jans Corporation's office is officially open for business, Monday through Friday, from 8:00 A.M. to 5:00 P.M. For Jans Corporation field employees, although the regular working hours vary between 7:00 A.M. and 5:00 P.M., Monday through Friday, actual working hours and days are determined by the Job Superintendent for the crew to which you will be assigned.

<u>Items You Must Provide</u> – In order to be employed by Jans Corporation, you must have the following items with you when you report to work each day:

- Work Boots
- · Appropriate Clothing
- Necessary Tools
- Means of Transportation
- WILLINGNESS TO WORK WITH A GOOD ATTITUDE!!!

I understand that all employment offers are conditional pending results from the following:

- E-Verify (verification of eligibility to work in the United States)
- Criminal History Check
- Motor Vehicle Record
- Pre-Employment Drug Screen
 - <u>Drug Testing Fees</u> In the event that you fail to pass the drug test or that you do not remain employed by Jans Corporation for at least a period of thirty (30) working days, you will be required to pay for the testing procedures performed. The cost of this testing is approximately \$65.00.
- <u>CDL Drivers</u> If you are currently a CDL Holder, I give Jans Corporation permission to obtain information on any positive drug test, alcohol test (.04 or greater), or any refusal to be tested.
- <u>Fitness for Duty Exam</u> In some cases Jans Corporation may require a "Fitness for Duty Exam". If you are thereafter hired and do not remain employed by Jans Corporation for at least a period of thirty (30) working days, you will be required to pay the cost of the testing procedures performed. The cost of this testing is approximately **\$250.00**.

Please note that the results of the information listed above could have an impact on hiring.

I have read and understand the requirements for prospective applicants listed above and agree to comply with them in the event of being hired for employment.

Applicant's Name (Please Print)	
Applicant's Signature	Date