Thank you for your interest in applying for a job with our Company. Because of our commitment to offering the highest possible satisfaction to our customers, we are only interested in hiring the best. We want to have a complete understanding of your qualifications, motivations and interests so that we can make careful and deliberate hiring decisions that will benefit both the company and our employees. Please answer the following questions honestly, completely and thoughtfully.

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex, national origin, age, marital status or veteran status, citizenship, genetic information, or disability.

Danaganal Information ————	Date of Application:				
	First Name:			Middle Initial:	
Address:Street			City		
			Social Security Number:	//	
State	Zip				
Telephone: ()					
If you are under 18 years of age, do you h	nave a work permit? Yes	l No □			
If you have ever worked under another na	ume, please identify				
Job Interests —					
Position Desired:		Date	you can start work:		
What starting salary or wage do you expe	ect: \$/hr	\$/wk	\$/1	month	
Are you available to work full time? Yes	□ No □	Are you available for p	art-time work? Yes □	No □	
Are you willing to work any shift? Yes □	№ П				
Are there any days of the week when you	would be not available to	work? Please specify: _			
How did you learn of this job opening? _					
Have you ever worked for this company l	before? Yes □ No □	When?	Who was your superv	isor?	
Why did you leave?			·		
Do you know anyone who works here?	Yes □ No □ Who?	?			
Education And Training ———					
Please Circle Highest Grade Completed:	1 2 3 4 5 6 7 8 Grade School	9 10 11 12 High School	1 2 3 4 College	1 2 3 4 Trade/Tech	
What was the last school you attended? _					
What extracurricular activities did you pain which you are applying?					
Vork Experience ————					
Beginning with your present or more recei	nt employer, describe your	employment experience	s below:		
Are you presently employed? Yes □ 1					

If yes, to where?

Are you on layoff and subject to recall? Yes □

No □

Present or Last Employer:	
Address:	
Kind of Business:	Phone:
Starting Position:	Pay: \$
Final Position:	Pay: \$
Dates Employed: From: To: Name of	& Title of Supervisor:
Description of your work and responsibilities:	
Reason for leaving:	
Will you receive a satisfactory reference from this employer? Yes □ No □	☐ If no, please explain:
May we contact your present employer at this time?: Yes $\square$ No $\square$	If no, please explain:
Next Previous Employer:	
Address:	
Kind of Business:	Phone:
Starting Position:	Pay: \$
Final Position:	Pay: \$
Dates Employed: From: To: Name of	& Title of Supervisor:
Description of your work and responsibilities:	
Reason for leaving:	
Will You Receive a satisfactory reference from this employer? Yes □ No	☐ If no, please explain:
Next Previous Employer:	
Address:	
Kind of Business:	Phone:
Starting Position:	Pay: \$
Final Position:	Pay: \$
Dates Employed: From: To: Name of	& Title of Supervisor:
Description of your work and responsibilities:	
Reason for leaving:	
Will you receive a satisfactory reference from this employer? Yes $\square$ No $\square$	☐ If no, please explain:

Perso	nal Information <del></del>				
Do you	have, or have you applied for the legal right to re	main permanently and v	work in the United	d States? Yes □ No □	
Have yo	ou ever been discharged or asked to resign by an o	employer? Yes □	l No □	If yes, please explain:	
	d of a criminal conviction will not necessarily bo , the nature and seriousness of the violation, and				e
Have yo	ou ever been convicted of a crime, other than min	or traffic violations?	Yes □ No □ 1	If yes, please explain:	
Please	complete this section only if the job for which yo	u are applying might r	equire you to driv	e company vehicles	
Do you	have a valid driver's license? Yes $\square$ No $\square$				
License	number and state:				
Have yo	ou had any accidents in the last 5 years? Yes □	No □ If yes, ple	ase give details: _		
Has you	ır driver's license ever been suspended, revoked,	denied, or cancelled?	Yes □ No □		
If yes, p	please explain:				
Milita	nry Experience				
Comple	ting this section is optional. Leave blank if you	do not wish to answer.			
Have yo	ou ever been in the United States Armed Services	? Yes □ No □ W	hat branch:		
Describ	e any skills you acquired in the service which wo				
	e any skins you acquired in the service which wo			apprying.	
Refer	ences —				
	names of any professional or personal characte of recommendation. Please do not list relatives.	r references who have	known you for th	e last three years and from who you can obtain	n
	g recommendation I touse do not ust retainest				
1.	Name:		Occupation:		
	Address:		City:	Phone:	
	Relationship to Applicant:				<del></del>
2.	Name:		Occupation:		
	Address:		City:	Phone:	
	Relationship to Applicant:				
3.	Name:		Occupation:		
	Address:		City:	Phone:	
	Relationship to Applicant:				

## PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY

By signing below, I certify that I have read, understand and agree to each of the following statements:

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge, and I have not knowingly withheld any information that, if known to the Company, would affect my application unfavorably.

If I am hired by the Company, and if the Company discovers at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

This employment application will be considered only if it is submitted in response to a current job opening. If I want to be considered for a future job opening with the company, I must fill out another application in response to that opening.

If offered a position, I agree to submit to post-offer-pre-employment testing for drugs or alcohol prior to beginning work with the company, and I understand that a positive test will form the basis for rescission of any job offer. I understand that if I am employed by the Company, I may be required, when job related and consistent with the Company's business needs, to undergo a medical examination or testing for alcohol. I further understand that I may be required to submit to a test for the use of illegal drugs at any time.

In consideration of my employment with the Company, I agree to abide by all the Company's rules and regulations.

I understand that nothing in this employment application creates a contract of employment between me and the Company. If I am hired by the Company, my employment and compensation are "at will," which means that my employment can be terminated, either by the Company or me, with or without cause, and with or without notice. I understand that no manager or supervisor has the authority to make any employment agreement with me, either orally or in writing, which is not an at-will agreement. Only the President of the Company has the authority to enter into an employment agreement with me for any specified period of time.

I agree to release to the Company or its designated agents all medical information, including but not limited to files, reports, x-rays, evaluations, and opinions held by medical personnel, to the extent such information is job related and consistent with the company's business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment.

In the event of my personal indebtedness to the company, I authorize the Company to withhold from my wages, including any last paycheck, such amounts as permitted by law to satisfy my obligation to the company.

## PLEASE READ CAREFULLY BEFORE SIGNING

I understand and agree that any causes of action or claims that I may have or bring against the Company, or that the Company may have or bring against me, shall be commenced within the applicable statute of limitations period, within six (6) months of my knowledge of such claim or cause of action, or within six (6) months after my separation from my employment, whichever is earlier.

I give the Company my permission to conduct any investigation regarding the information contained in my employment application, which the Company thinks is necessary to determine my qualifications for assuming a job with the company. I give the Company my permission to contact any former employer, school, or college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, credit, education, or employment record, and I give my consent to any such source to release to the Company whatever information they have about me. I also unconditionally release all named and unnamed sources from any liability that might result from furnishing any information about me.

Date	Signature