

APPLICATION FOR EMPLOYMENT
(WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER)

APPLICANT'S STATEMENT

I understand that the Corporation is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring promotion, transfer, and compensation to all qualified applicants and employees without regard to age, race, color, national origin, sex, religion, handicap or disability, or any other category protected by federal, state, or local law.

I authorize former and present employers, and professional, work, and personal references listed in the application and any other individuals I may name, to give the Corporation or its designee any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release such parties from all liability for any damages that may result from furnishing same to the Corporation. I also authorize the Corporation to provide truthful information concerning my employment with it to future employers and I agree to hold it harmless for providing such information.

In consideration for the Corporation considering my application for employment, I agree that any dispute between the Corporation and me to my application for employment, or my employment, if I am hired, will be resolved through mutually binding arbitration. I understand that I have the right to review the Corporation's Arbitration Policy and Procedures prior to signing this application. If I am offered and accept employment with the Corporation, I will be required, as a condition of employment, to sign a stand-alone Arbitration Agreement.

I understand that the Corporation reserves the right, to the extent permitted by law, to require drug and alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the Corporation or its designee. I release the Corporation and its designee from any and all liability and damages which may result or arise from any drug test or the provision of information in connection with such a test.

I understand that this employment application and any other Corporation documents are not promises of employment. Should I be employed, I understand that my employment will be on a trial period for ninety (90) days from the date of my hiring, and that I will remain an at-will employee thereafter. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice, and that the Corporation has a similar right. I understand that no manager, representative, or agent of the Corporation has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, except that the President may do so in writing.

The information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Corporation's judgment) that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I certify that I have received a separate written notification that the Corporation may obtain a consumer report on me for use in connection with my application and, if I am hired, my employment with the Corporation. I authorize the Corporation to obtain this report.

This application will be considered "active" for a maximum of thirty (30) days. To be considered for employment after that time, you must reapply.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THESE STATEMENTS.

Date

Applicant's Signature

Each inquiry on this application must be fully answered or completed. Otherwise, you will not be considered for employment.

PERSONAL DATA

| | | | | |
|---|--|---|---|-------------|
| Last Name | | First Name | | Middle Name |
| Present Address Street and Number City, State, Zip | | How long have you lived there: Years _____ Months _____ | | |
| Previous Address Street and Number City, State, Zip | | How long have you lived there: Years _____ Months _____ | | |
| Telephone Number(s) | | Social Security Number | Are you 18 years of age or older: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Position Desired: _____ Temporary | | Placement Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> | | |
| When are you available for work? _____ | | | | |

PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Include part-time and seasonal employment. If self-employed, give firm name and supply business references. DO NOT ANSWER "SEE RESUME." Fill out this form **completely**.

| Employer 1 | | Dates Employed | | Work Performed | |
|---------------------|-------------------------|--------------------|-------|----------------|----------------|
| | | From | To | | |
| Telephone Number(s) | | | | | |
| Address | | Hourly Rate/Salary | | | |
| Job Title | Supervisor Name & Title | Starting | Final | | |
| Reason for Leaving | | | | | |
| Employer 2 | | Dates Employed | | | Work Performed |
| | | From | To | | |
| Telephone Number(s) | | | | | |
| Address | | Hourly Rate/Salary | | | |
| Job Title | Supervisor Name & Title | Starting | Final | | |
| Reason for Leaving | | | | | |
| Employer 3 | | Dates Employed | | | Work Performed |
| | | From | To | | |
| | | | | | |
| | | Hourly Rate/Salary | | | |
| Job Title | Supervisor Name & Title | Starting | Final | | |
| Reason for Leaving | | | | | |

| | | | | |
|----------------------------|------------------------------------|-----------------|--------------|--|
| Telephone Number(s) | | | | |
| Address | | | | |
| | | | | |
| Job Title | Supervisor Name & Title | Starting | Final | |
| | | | | |
| Reason for Leaving | | | | |

BACKGROUND INFORMATION

Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment.

List any other names which you may have used and which will be necessary to verify prior to your employment: _____

If hired, can you provide proof that you are legally entitled to work in the U.S.? Yes No

If not, what steps must be taken for you to begin employment lawfully? _____

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances: _____

May we contact your current employer? Yes No

If no, please explain: _____

Have you ever worked for this Corporation before? Yes No

If yes, please give dates and position: _____

Do you have any friends or relatives working here or for one of our other companies? Yes No

If yes, Name(s) and Relationship: _____

How were you referred to us? _____

Have you ever plead "no contest," nolo, or guilty to a crime, or been convicted of a crime? Yes No

Are any charges currently pending against you? Yes No

Has any adjudication ever been withheld? Yes No

(NOTE: Answering "yes" to these questions does not constitute an automatic bar to employment.) If you answered yes to any of the preceding questions, please give dates and details:

Do you have any commitments to any other employer which may affect your employment? Yes No

If yes, explain: _____

EDUCATION

| School Name | Years Completed (Circle) | Diploma/Degree | Describe Course of Study or Major | Describe Specialized Experience, Training, Skills, and Extra-Curricular Activities |
|-------------------------|--------------------------|----------------|-----------------------------------|--|
| Elementary | 4 5 6 7 8 | | | |
| High School | 9 10 11 12 | | | |
| College/University | 1 2 3 4 | | | |
| Graduate/Professional | 1 2 3 4 | | | |
| Trade or Correspondence | | | | |

RELEVANT EXPERIENCE

Please indicate positions you have held in prior jobs:

Management/Supervision

- General Manager
- Operations Manager
- Sales Manager
- Warehouse Manager
- Office Manager
- Shift Supervisor
- Other: _____

Office/Administrative/Sales

- Accounting
- General Clerical
- Secretary (Wpm: _____)
- Switchboard/Receptionist
- Sales Representative
- Customer Service
- Other: _____

Production

- Machine Operator
- Mechanic
- Other: _____
- Other: _____
- Other: _____

Warehouse

- Stock Clerk
- Forklift Operator
- Order Picker/Puller
- Stacker/Loader
- Shipping/Receiving Clerk
- Delivery
- Other: _____

List any professional designations, certifications, licenses, or courses that may be applicable to the position for which you are applying:

OTHER INFORMATION

Please describe any other experience that you have which would be relevant to the job for which you are applying:

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DRIVING INFORMATION

Do you have a current valid driver's license? Yes No If yes, License No.: _____ State: _____ Expiration Date: _____
 If you do not have a driver's license for the state in which you currently reside, why not? _____

Has your license ever been suspended or revoked? Yes No If yes, explain: _____

Do you have personal automobile insurance? Yes No If no, explain: _____

Have you ever been denied personal automobile insurance or has it ever been terminated or suspended? Yes No If yes, explain: _____

Have you ever been convicted, pled guilty, or pled nolo to a charge of DWI or DUI? Yes No

Are any such charges currently pending against you? If yes to either question, explain: _____

Please list all moving traffic violations in the last five (5) years:

| OFFENSE | DATE | LOCATION | COMMENTS |
|---------|------|----------|----------|
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