

Chinchor Electric, Inc.



You **MUST** Supply a Copy of your
Valid Driver's License when Turning
in your Application.

NO APPLICATION WILL BE
REVIEWED UNLESS ALL
SECTIONS ARE COMPLETE

PLEASE PRINT ALL
INFORMATION
REQUESTED EXCEPT
SIGNATURE

APPLICATION FOR EMPLOYMENT

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PLEASE COMPLETE ALL PAGES DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone () _____

If under 21, please list age _____

Position applied for (1) _____
and salary desired (2) _____
(Be specific)

Can you work nights? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

Date you can start? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A FELONY? No Yes

If yes, explain. _____

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APPLICATIONS WILL BE
KEPT ON FILE FOR 6
MONTHS THEN
DESTROYED.

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A VALID FLORIDA DRIVER'S LICENSE? Yes No

What is your means of transportation to work? _____

Driver's license
number _____ State of issue _____ Operator Commercial (CDL)

Expiration date _____

Have you had any accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How Many? _____

Please list two references other than relatives or previous employers.

Name _____ Name _____

Position _____ Position _____

Company _____ Company _____

Address _____ Address _____

Telephone () _____ Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Large empty rectangular box for providing additional information or qualifications.

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APPLICATION FOR EMPLOYMENT

MILITARY

HAVE YOU EVER BEEN IN THE ARMED FORCES? Yes No

ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Work Experience Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From	Start
		To	Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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How did you hear about us? Newspaper Drive-by Referral by who _____

Did you complete this application yourself Yes No

If not, who did? _____

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by CHINCHOR ELECTRIC, INC. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of CHINCHOR ELECTRIC, INC., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and CHINCHOR ELECTRIC, INC. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant _____ Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

SELF-IDENTIFICATION SHEET
RACE/ETHNICITY AND SEX
(Revised 8/04)

It is the policy of Chinchor Electric, Inc. to provide equal employment opportunity without regard to race, color, religion, sex, national origin, age, and disability, veteran's status, or sexual orientation. Chinchor Electric, Inc. seeks and employs the most highly qualified personnel at all locations and facilities. Chinchor Electric, Inc. requests your assistance in meeting Federal regulations by providing self-identification information.

As a matter of company policy as well as applicable law, we are required to keep records and perform certain analyses of our employee workforce by race, ethnicity and sex. Since such analyses are only possible if we know the profile of employees, we are using this means to ask you to voluntarily complete this survey and return it to us promptly. We appreciate that some individuals will find this request intrusive, and we regret this. However, please be advised that we are required by the government to keep such records and perform such analyses. Your cooperation will allow us to be accurate.

The categories listed below are those used by the U.S. Bureau of Census and the Department of Labor and are the only options currently available for reference reporting purposes. These categories do not accommodate persons with a diverse ethnic background, so we ask that you choose only one.

Sex Identification (Title 41, Part 60 of the Code of Federal Regulations)

- Female Male

Race/Ethnicity Identification (Title 41, Part 60 of the Code of Federal Regulations)

Please identify yourself in one of the following five categories:

- American Indian or Alaskan Native:** A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or has community recognition.
- African American/Black (not of Hispanic Origin):** A person having origins in any of the Black racial groups of Africa.
- Hispanic:** A person of Mexican, Puerto Rican, Cuban Central or South American or other Spanish culture or origin, regardless of race.
- White (not of Hispanic Origin):** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Asian American/Pacific Islander:** A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes for example, China, Japan, North Korea, the Philippine Islands, and Samoa; and, on the Indian subcontinent, includes India, Pakistan, Bangladesh, Nepal, Sri Lanka, Sikkim, and Bhutan.

Applicant Name (Please Print)

Applicant Signature Date



DRUG AND ALCOHOL TESTING NOTIFICATION AND CONSENT FORM

Chinchor Electric, Inc. requires that all applicants for employment be tested for alcohol and illegal drug use. Within 2 business days of receiving a conditional job offer from Chinchor Electric, Inc., verbal or written (whichever comes first), applicants are required to take a drug and alcohol screening test. Failure to fulfill this requirement will result in ineligibility for employment consideration, unless the applicant provides documentation of a bona fide emergency that prevented attendance.

The test will be conducted in accordance with the "Mandatory Guidelines for Federal Workplace Drug Testing Programs" published by the Department of Health and Human Services (53 FR 11970). The laboratory analysis will be done by a laboratory certified by the Substance Abuse and Mental Health Services Administration (formerly the National Institute on Drug Abuse) to help ensure accuracy and protect your privacy.

If a "positive" test result occurs, indicating the presence of listed drugs, it will be confirmed by another test method applied to the same sample. If the result is still positive, the information will be referred to an independent Medical Review Officer (MRO – a trained physician) who will contact you to discuss the situation before any report is made to the Company. You will have an opportunity to offer possible reasons for the results with the MRO at that time. Unless you are able to explain the reason for the "positive" result, the MRO will notify the Company that you are ineligible for employment. No other information will be given to the Company.

Failing the drug and alcohol test will result in your disqualification as an applicant since a "necessary condition precedent" (a condition that must be performed before the offer is binding on the Company) to your acceptance of the job offer was not fulfilled. You will not be eligible for further consideration for employment until one year has passed, and you must then provide satisfactory evidence of rehabilitation and pass a drug test.

The MRO's report to the Company will state whether or not you are eligible for hire; no further information will be given to the Company.

This drug test will be to detect the presence of the following substances:

- | | | |
|----------------|-------------|-----------------------|
| ~ Alcohol | ~ Cocaine | ~ Opiates |
| ~ Amphetamines | ~ Marijuana | ~ Phencyclidine (PCP) |

A urine sample will be required for this test.

I have read and understood the above information and hereby consent to the administration of the drug and alcohol detection urine test. Further, I give my consent for the Medical Review Officer to advise Chinchor Electric, Inc. if I am eligible for hire based upon the test results.

Applicant's Name (Print)

(Signature)

(Date)