APPLICATION FOR EMPLOYMENT MAGNI-POWER COMPANY MAGNI-FAB DIVISION

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, medical condition, handicap or disability, or any other status protected by law.

WELCOME & INTRODUCTION

Thank you for your interest in applying for a job with Magni-Power Company (MPC). We need you to fill out this application so we can determine whether there is a basis for a working relationship between you and MPC. Please understand that our acceptance of this application does not create any obligation on our part to hire you nor on your part to work for us. Also, please be aware that your signature on this document has certain legal consequences. We suggest you read the "Applicant's Acknowledgement" at the end of this application before you proceed further so that you are fully aware of what we expect of applicants and employees. Then, answer all questions thoroughly and truthfully.

| PERSONAL INFORMATION DATE _ | | SSN | | | |
|--|-----------|--------------|-------------|--|--|
| NAME | | | | | |
| last first | | | middle | | |
| PRESENT ADDRESS | | | | | |
| street | city | state | zip | | |
| PHONE NUMBER | REFER | FERRED BY | | | |
| IF RELATED TO ANYONE IN OUR COMPANY, PLE | ASE STATE | NAME AND DE | PARTMENT. | | |
| | | | | | |
| If you are under 18 years of age, can you provide | | | | | |
| required proof of your eligibility to work? Proof of eligibility will be required upon employment. | | ☐ Yes | □ No | | |
| Have you ever filed an application with us before? If Yes, give date | | ☐ Yes | □ No | | |
| Have you ever been employed with us before? If Yes, give date | | ☐ Yes | □ No | | |
| Are you currently employed? | | ☐ Yes | □No | | |
| May we contact your current employer? Are you prevented from lawfully becoming employed | d | ☐ Yes | □ No | | |
| in this country because of Visa or Immigration Status Proof of citizenship or immigration status will be required upon employ | | ☐ Yes | □ No | | |
| On what date would you be available for work? | | | | | |
| Are you available to work: ☐ Full Time ☐ Par | t Time (| □ Shift Work | ☐ Temporary | | |
| Are you currently on "layoff" status and subject to re | ecall? | ☐ Yes | □ No | | |

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| Can you travel if a job requires it? Have you been convicted of a felony within the last 7 years? | | | | | ☐ Yes | □ No □ No | |
|--|--------------------------------|---|-------------------------|------------|----------------|---|------------------------|
| es, please expl | lain | | | | | | |
| co, picase cap. | din | | | | | | |
| | | | | | | | |
| es that would ase answer the | be best for you following ques | u to work. We stion based on t | may not h the unders | ave a | a job positio | you cannot work on that fits your so will rely on your | chedule. Also, answer. |
| you have relia | ble transportat | tion to and fron | n work? | | | ☐ Yes | □ No |
| MON | TUES | WED | THUR | S | FRI | SAT | SUN |
| 1st SHIFT | 1st SHIFT | 1st SHIFT | 1st SHII | FT | 1st SHIF | T 1st SHIFT | 1st SHIFT |
| 2nd SHIFT | 2nd SHIFT | 2nd SHIFT | 2nd SHI | FT | 2nd SHIF | T 2nd SHIFT | 2nd SHIFT |
| 3rd SHIFT | 3rd SHIFT | 3rd SHIFT | 3rd SHII | FΤ | 3rd SHIF | T 3rd SHIFT | 3rd SHIFT |
| OVERTIME | OVERTIME | OVERTIME | OVERTI | ME | OVERTIM | ME OVERTIME | OVERTIME |
| | | | | | | | |
| DUCATION | | | GRAD YES | DUAT NO | | AAJOR SUBJECTS | S GRADI |
| IGH SCHOO | DL . | 74-0 | 1 | | | | |
| OLLEGE | | 1 () () () () () () () () () (| | | | | |
| RADE SCHO | OL | | | | | | |
| | | | | | | | |
| cribe any specia | ılized training, a | apprenticeship, sl | kills, and ex | traci | ırricular acti | vities: | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| cribe any job-re | lated training re | eceived in the Ur | nited States | milit | rarv: | | |
| | | | | **** | | | |
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| | | | | | | | |

PREVIOUS JOB HISTORY

Once your application is approved there are several reference check forms which you must fill out and sign in your own handwriting. We cannot consider your application if you do not complete the reference check forms. Each reference check form will be mailed to your supervisor or other person at each previous place of work within the last ten (10) years. We may also follow up each reference check by phone. You have the option of requesting that we not check with current employer, though if you are hired, we will complete that reference check at that time. Unanswered reference checks may cause us to treat your application as incomplete.

Start with your present or last job. Include any job-related military assignments and volunteer activities.

| . Employer | Dates E | | | | |
|------------------------|---------------------------------------|----------------------|----------------|--|--|
| 1. Employer | From | То | Work Performed | | |
| Address | | | | | |
| TI. I N. I. () | Hourly R | Hourly Rate/Salary | | | |
| Telephone Number(s) | Starting | Final | | | |
| Job Title | | | | | |
| Reason for leaving | | | | | |
| Employer | Dates E | mployed | W. I. D. C I | | |
| Employer | From | То | Work Performed | | |
| Address | | | | | |
| Telephone Number(s) | Hourly R | ate/Salary | | | |
| receptione realiser(s) | Starting | Final | | | |
| Job Title | | | | | |
| Reason for leaving | | | | | |
| Employer | Dates Er | mployed | W. I.D. C. I | | |
| Employer | From | То | Work Performed | | |
| Address | | | | | |
| Telephone Number(s) | Hourly R | | | | |
| Telephone ((dineer(0) | Starting | Final | | | |
| Job Title | | | | | |
| Reason for leaving | | | | | |
| Employer | Dates Er | mployed | W/ 1 D C 1 | | |
| Imployer | From | То | Work Performed | | |
| Address | | | | | |
| Telephone Number(s) | Hourly R | ate/Salary | | | |
| retephone (vulnber(s) | Starting | Final | | | |
| Job Title | | | | | |
| Reason for leaving | | | | | |
| Employer | Dates Er | mployed | 7777 1 D C 1 | | |
| | From | То | Work Performed | | |
| Address | | | | | |
| Telephone Number(s) | Hourly Ra | ate/Salary | w | | |
| | Starting | Final | | | |
| Job Title | | | | | |
| Reason for leaving | | 1 | | | |
| If you need addition | onal space, please continue on a sepa | arate sheet of paper | | | |