

#### Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

|   |               | (Please Print)           |                      |                       |           |
|---|---------------|--------------------------|----------------------|-----------------------|-----------|
| Position(s) Applied For:  |               |                          | Date of Application: |                       |           |
| How Did You Learn About Us?   |               |                          |                      |                       |           |
| ()Advertisement<br>()Employment Agency  |               | () Friend<br>() Relative |                      | () Walk-I<br>() Other | n         |
|   |               |                          |                      | • •                   |           |
| Last Name   | Firs          | t Name                   | Mide                 | dle Name              |           |
| Address Number  | Street        | City                     |                      | State                 | Zip Code  |
| Telephone Number(s)   |               | Socia                    | l Security Number    | \ \                   |           |
| If you are under 18 years   | s of age, car | n you provide re         | equired              |                       |           |
| proof of your eligibility to  | _             |                          | •                    | () Yes                | () No     |
| Have you ever filed an ap   | plication w   | with us before?          |                      | () Yes                | () No     |
|   |               |                          | If Yes, give date    | e                     |           |
| Have you ever been empl   | oved with ı   | as before?               |                      | () Yes                | <br>() No |
| •   | v             |                          | If Yes, give date    | e                     | _         |
| Are you currently employ  | yed?          |                          |                      | () Yes                | () No     |
| May we contact your present employer?   |               |                          |                      |                       | () No     |
| Are you prevented from l  | awfully bec   | coming employed          | d in this            |                       |           |
| country because of Visa   | or Immigra    | tion Status?             |                      |                       |           |
| Proof of citizenship or immigration status will be required upon employment.  |               |                          |                      | () Yes                | () No     |
| On what date would you  | be available  | e for work?              |                      |                       |           |
| Are you available to work   | s: () Full Ti | me () Part Time          | e () Shift Work (    | ) Tempora             | ary       |
| Are you currently on "lay-off' status and subject to recall?  |               |                          |                      | () Yes                | () No     |
| Can you travel if a job re  | quires it?    |                          |                      | () Yes                | () No     |
| Have you been convicted of a felony within the last 7 years?  Conviction will not <i>necessarily disqualify an</i> applicant from employment.  If Yes, please explain |               |                          |                      |                       | () No     |

#### **Employment Experience**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

| Employer  |            | Dates Employed |            |                |
|---|------------|----------------|------------|----------------|
|   |            | From           | То         | Work Performed |
| Address   |            |                |            |                |
| Telephone Number(s)   |            | Hourly Ra      | ate/Salary |                |
|   |            | Starting       | Final      |                |
| Job Title   | Supervisor |                |            |                |
| Reason for Leaving  |            |                |            |                |
| Employer  |            | Dates Employed |            |                |
|   |            | From           | То         | Work Performed |
| Address   |            |                |            |                |
| Telephone Number(s)   |            | Hourly Ra      | ate/Salary |                |
|   |            | Starting       | Final      |                |
| Job Title   | Supervisor |                |            |                |
| Reason for Leaving  |            |                |            |                |
| Employer  |            | Dates E1       | mployed    |                |
|   |            | From           | To         | Work Performed |
| Address   |            |                |            |                |
| Telephone Number(s)   |            | Hourly Ra      |            |                |
|   |            | Starting       | Final      |                |
| Job Title   | Supervisor |                |            |                |
| Reason for Leaving  |            |                |            |                |
| Employer  |            | Dates E1       | mployed    |                |
|   |            | From           | То         | Work Performed |
| Address   |            |                |            |                |
| Telephone Number(s)   |            | Hourly Ra      |            |                |
|   |            | Starting       | Final      |                |
| Job Title   | Supervisor |                |            |                |
| Reason for Leaving  |            |                |            |                |
| If you need additional space, please continue on a separate sheet of paper. |            |                |            |                |

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|--|---------------|
| List professional, trade, business or civic activities and offices held.   |               |
| You may exclude membership that would reveal gender, race, religion, national origin, age, ancestry, a other protected status: | lisability or |
|  |               |
|  |               |

## Education

|                 |                | Name and A<br>of School |            | Course of Study      | Years<br>Completed | Diploma<br>Degree |
|-----------------|----------------|-------------------------|------------|----------------------|--------------------|-------------------|
| High S          | School         |                         |            |                      |                    |                   |
| Undergr<br>Coll | raduate<br>ege |                         |            |                      |                    |                   |
| Grad<br>Profes  |                |                         |            |                      |                    |                   |
| Ot1<br>(Spe     |                |                         |            |                      |                    |                   |
|                 | Indicate any   | foreign langu           | lages you  | ı can speak, rea     | id and / or v      | write             |
|                 | FLU            | ENT                     |            | GOOD                 |                    | FAIR              |
| Speak           |                |                         |            |                      |                    |                   |
| Read            |                |                         |            |                      |                    |                   |
| Write           |                |                         |            |                      |                    |                   |
|                 | Describe any   | specialized traini      | ng, appren | ticeship, skills and | extra-curricula    | r activities.     |
|                 |                |                         |            |                      |                    |                   |
|                 |                |                         |            |                      |                    |                   |
|                 |                |                         |            |                      |                    |                   |
|                 |                |                         |            |                      |                    |                   |
|                 | Descr          | ibe any job relate      | d training | received in the Unit | ed States milita   | ry.               |
|                 |                |                         |            |                      |                    |                   |

## Additional Information

| Other Qual Summarize special job-related skills and qualification experience.                       |   |
|---|---|
|   |   |
|   |   |
|   |   |
| Specialized Skills Check Skills/Equipment Ope   | erated  |
|   | I   |
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|   |   |
|   | 1   |
| State any additional information you feel may be he   | elpful to us in considering your application. |
|   |   |
|   |   |
|   |   |
| Note to Applicants: DO NOT ANSWER THIS Q  |   |
| INFORMED ABOUT THE REQUIREMENTS (APPLYING.  | OF THE JOB FOR WHICH YOU ARE                  |
| Are you capable of performing in a reasonable m   |   |
| without a reasonable accommodation, the activity  |   |
| job or occupation for which you have applied? A activities in such a job or occupation is attached. | -   |
| References:   |   |
|   |   |
| (Name)  | Phone#  |
|   |   |
| Address   |   |
| (Alice)   | DI H  |
| (Name)  | Phone#  |
| Address   |   |
| Address   |   |

# **Employment Questions**

Please use other side if necessary

| Applic | icant's Signature Date   |       |
|--------|--|-------|
| _      | ee that my employment may be subject to confirmation of an acceptable driving record. The statements are true and correct to the best of my knowledge. | he    |
|        |  |       |
| 8.     | . Valid Driver's License No.: State: List any accidents or tickets during the previous 36 months:  |       |
| 7.     | . Are you subject to any non-compete agreements or employment restrictions from previous employer?   | m a   |
| 6.     | . Do you have any physical or medical reasons that would prevent you from perform the job as described? If so, please describe on reverse side.        | rming |
| 5.     | . Are you willing to do home study?  |       |
| 4.     | . What would you expect from this job in order to really love it?  |       |
| 3.     | . What special skills do you feel that you can bring to this job?  |       |
| 2.     | . What is it that you like least about your last job?  |       |
| 1.     | . What is it that appeals to you most about this job?  |       |



The information contained in my application for employment with Access Lock Technologies is true to the best of my knowledge and belief. I understand that any misrepresentation or false statement made by me in connection with the application or any related documents which are deemed material by Access Lock Technologies shall result in Access Lock Technologies not employing me or, if employed, terminating my employment. I understand and agree that all information furnished in my application and all attachments may be verified by Access Lock Technologies or its authorized representative.

I hereby authorize all individuals and organizations named or referred to in my application and any law enforcement organization to give Access Lock Technologies all information relative to such verification and hereby release such individuals, organizations, and Access Lock Technologies from any and all liability for any claim or damage resulting there from. I hereby acknowledge that I have been informed by Access Lock Technologies that Access Lock Technologies may seek to obtain a consumer report and/or investigative report that will include personal information regarding me, including but not limited to, educational history, work references, driving record and criminal convictions or arrest records if allowed, in order to assist Access Lock Technologies in making certain employment decisions. I further acknowledge notification by Access Lock Technologies that reports may be provided to Access Lock Technologies by other firms subcontracted for that purpose. I, my heirs, assigns and legal representatives, hereby release and fully discharge Access Lock Technologies, its parent and affiliated companies and the respective officers, directors, shareholders, employees, agents of each, including subcontractors, from any and all claims, monetary or otherwise, that I may have against Access Lock Technologies, its parent, affiliates or subcontractors, arising out of the making, or use of, either a consumer report and/or investigative report, including any errors or omissions contained or omitted from such reports or investigations.

Access Lock Technologies agrees to inform you if an employment decision has been influenced by information contained in a consumer report, made at our request. Access Lock Technologies will make known to you the consumer reporting agency who furnished the report and send you a copy of "A Summary of Your Rights Under The Fair Credit Reporting Act." so that you can request from the consumer reporting agency a free copy of your consumer report.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Access Lock Technologies is of an "at will" nature, which means that you may resign at any time and Access Lock Technologies may discharge you at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

| Applicant's Signature           | Date |
|---------------------------------|------|
|                                 |      |
| Applicant's Name - Please print |      |