



## APPLICATION FOR EMPLOYMENT

### WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

*Consistent with applicable law, we provide equal employment opportunity to all persons regardless of age, race, color, national origin, religion, sex, marital status, handicap or disability, veteran status, or any other legally protected status.*

Before you begin: We appreciate your interest in Valco Industries, Inc. ("Valco") and will give your application serious attention. It will be active for 60 days. After 60 days you must apply again to be considered for employment. Please understand that not all applicants are interviewed immediately and that some may never be interviewed. You may be required to take skill tests and/or submit additional references or other relevant information needed for us to make an informed decision on your application for employment. *No applicant will be hired without references being checked*, so it is your advantage to provide names and phone numbers of your former supervisors on this application. Should you be offered a position, it will be contingent upon your receiving a negative result on a pre-employment drug test.

Accuracy and completeness of this application are important factors in determining acceptability for employment with our company. Please be neat in completing this form and do so in your own handwriting. Please inform us if you need any assistance or accommodation in the application process because of a disability. Valco provides reasonable accommodations consistent with the law.

Use any blank space on this application or use a separate sheet of paper and attach it to this application, if you need additional space to answer any question completely.

### APPLICANT INFORMATION

<b>Last Name:</b>	<b>First:</b>	<b>M.I. :</b>
<b>Phone Number:</b>		<b>Social Security Number:</b>
<b>Email Address:</b>		
<b>Mailing Address:</b>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Have you ever been known by any name(s) other than the above?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, what name(s)?</b>		

### POSITION & WORK AUTHORIZATION

<b>Position Applied For:</b>	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Internship
<b>Desired Salary/Hourly Wage:</b>	<b>Desired Shift</b> <input type="checkbox"/> First <input type="checkbox"/> Second <input type="checkbox"/> Either
<b>Are you 18 years or older?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Are you legally authorized to work in the United States?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>How did you hear about our job opening?</b>	
<b>Have you ever applied for employment with Valco or worked for Valco before?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, when?</b>	
<b>Do you have relatives that work at Valco?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, please list their name(s):</b>	
<b>Have you ever been disciplined, suspended, or terminated from employment within the last 10 years?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, explain the nature, date and location of disciplinary action:</b>	
<b>How many regularly scheduled work days did you miss last year (excluding any FMLA leave):</b>	

PREVIOUS EMPLOYMENT			
United State Military or Reserves Branch:			
Dates:		Rank at Discharge:	
List all present and past employment, full- and part-time, starting with your most recent employer for the last 10 years. Use additional paper if needed.			
Company:		Phone Number:	
Address:			
Supervisor:		Supervisor Phone Number:	
Job Title:	Starting Wage \$	Ending Wage \$	
Responsibilities:			
Employed From:		To:	Reason for Leaving:
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Company:		Phone Number:	
Address:			
Supervisor:		Supervisor Phone Number:	
Job Title:	Starting Wage \$	Ending Wage \$	
Responsibilities:			
Employed From:		To:	Reason for Leaving:
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Company:		Phone Number:	
Address:			
Supervisor:		Supervisor Phone Number:	
Job Title:	Starting Wage \$	Ending Wage \$	
Responsibilities:			
Employed From:		To:	Reason for Leaving:
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Company:		Phone Number:	
Address:			
Supervisor:		Supervisor Phone Number:	
Job Title:	Starting Wage \$	Ending Wage \$	
Responsibilities:			
Employed From:		To:	Reason for Leaving:
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Company:		Phone Number:	
Address:			
Supervisor:		Supervisor Phone Number:	
Job Title:	Starting Wage \$	Ending Wage \$	
Responsibilities:			
Employed From:		To:	Reason for Leaving:
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No			

EDUCATION				
School	Name & Location of School	Years Attended	Degree	Did you Graduate?
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade / Other				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
Please list any special achievements, honors, certifications, professional licenses, or special technical skills which you feel may be useful as we review you as a candidate for employment:				
REFERENCES				
Full Name:		Relationship:		
Company:		Phone Number:		
Address:				
Full Name:		Relationship:		
Company:		Phone Number:		
Address:				
Full Name:		Relationship:		
Company:		Phone Number:		
Address:				

#### APPLICATION

- I certify that this Application for Employment was completed by me, and that all entries on it are true and complete to the best of my knowledge. I understand that Valco Industries, Inc. ("Valco") may terminate my employment for any false or misleading statements or omissions in this application, in any interview or otherwise in the application or hiring process, whenever they may be discovered. I further agree to furnish any additional information and complete any applicable examinations as may be required to complete my employment file.
- I understand that completion of this application does not necessarily indicate that there are any positions open now and does not in any way obligate either me or Valco. This application will be kept active for 60 days from the date of its completion, after which it will not be considered. Incomplete applications will not be considered.

#### COMPANY POLICY

- In consideration of my employment, I agree to adhere to the expectations, regulations and policies of Valco. I understand that, if I accept employment with Valco, it will be employment at will, which means that either the Company or I have the right to terminate the employment relationship at any time, for any reason, with or without cause or notice.
- I understand that all new employees must comply with the verification requirements of the Immigration Reform and Control Act. I further understand that if I am hired, I will be required, within three days of starting work, to provide documents proving my identity and authorization to work in the United States. I understand that, consistent with Valco's policies and the law, any handicapped applicant who wishes to identify him or herself may be entitled to reasonable accommodation. I understand that this information is confidential and will be used only for appropriate purposes and that opting to or not to provide such information will not adversely affect an application.

#### **PRE-EMPLOYMENT DRUG SCREEN AGREEMENT**

- Because Valco is a Drug-Free Workplace, I acknowledge that a condition of employment is satisfactory completion of a body substance drug test. I understand that if I receive an offer of employment, Valco's policy will require me to submit a body substance sample for drug testing. I further understand the purpose of this analysis is to determine or rule out the presence of non-prescribed or prohibited dangerous controlled substances in my system. Should this occur, I freely and voluntarily consent to this requires for a body substance sample, and I release the company, its employees, agents and contractors from any and all liability whatsoever arising from this request for testing, from the actual testing procedures and from decisions made concerning my application for or continuation of employment based on the results of the analysis. I authorize the release of my drug and/or alcohol test results to Valco's medical review officer, and/or examining physician, as provided by the policy.
- I understand that refusal to submit a body substance sample shall constitute failure to apply or withdrawal of application and will prevent me from being employed.

#### **BACKGROUND CHECK & DISCLOSURE OF CONSUMER REPORT / INVESTIGATIVE CONSUMER REPORT UNDER THE FAIR CREDIT REPORTING ACT**

- In connection with my application for and with my employment, I understand that Valco may obtain or cause to be prepared consumer reports for employment purposes. It may be an investigative consumer report which is obtained through personal interviews and might include information as to my character, general reputation, personal characteristics, work habits, performance, experience, and mode of living. I understand that as directed by company policy and consistent with the job described Valco may request information from public and private sources about my driving record, court record, education, credentials, and past employment.
- I authorize Valco to obtain or cause to be prepared consumer reports, and investigative consumer reports, about me for employment purposes. I understand that in obtaining such consumer reports and investigative consumer reports, a consumer reporting agency may be used, and I authorize such use. I authorize any law enforcement agency, institution, information service bureau school, employer, reference or insurance company contacted by Valco or its agent, to furnish the information described above. I release Valco, its employees and agents, and all personals and entities furnishing above-mentioned information and reports about me from any and all liability of any type as a results of furnishing or obtaining such information and for any damages on account of furnishing or obtaining such information. I understand that I may make a written request, within a reasonable period of time, for a disclosure of the nature and scope of any investigative consumer report Valco has requested. I may also request a written summary of my rights under the Fair Credit Reporting Act.

#### **AUTHORIZATION TO RELEASE INFORMATION**

- In connection with my application for and with my employment, I understand that Valco may obtain certain public and private, oral and written information about me, my credentials and my academic and job performance from information providers including, but not limited to, schools and previous employers ("Providers").
- I authorize Providers, including schools and previous employers and any of their employees, to share with Valco (or any of its representatives or consultants) any and all information about me, whether written or oral, which may include but shall not be limited to, information related to academic and/or job performance, discipline, or attendance (collectively, "Information"). I hereby waive any right to written notice from the Providers prior to their disclosure of Information to Valco. I hereby release the Providers, Valco and its agents, representatives, consultants, and employees from any and all known and unknown legally waivable claims, causes of action, or similar rights of any type arising under federal, state, or local law ("Claims") relating to the disclosure of Information to Valco or its representatives or consultants, including but not limited to, Claims that the disclosures caused me any harm.
- I agree to never bring any action or proceeding against any Provider, Valco, or its agents, representatives, consultants or employees based on or relating to the disclosure of Information pursuant to this Authorization to Release Information.

#### **SIGNATURE FOR ALL OF THE ABOVE RELEASES**

- I understand that my application will not be processed until it is completed and signed.
- This authorization, certification and disclosure will remain effective for the duration of my employment, if I am hired.
- I authorize that I am signing of my own free will and that I have had a reasonable amount of time to consider whether to sign it.

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



## PRE-EMPLOYMENT SURVEY

*Please answer the following questions based on your experience and unique perspective. Use the back of the page if you need additional space.*

Name: \_\_\_\_\_ Job Title at Current/Most Recent Employer: \_\_\_\_\_

1. What three (3) things do you like best about your current/most recent job?
2. What three (3) things do you like least about your current/most recent job?
3. If you could change three (3) things about your current/most recent job, what would they be?
4. What do you expect from an employer?
5. What do you think is reasonable for an employer to expect from you? (i.e., what do you think a company should get from you for the wages it pays you?)