

VOLTMER ELECTRIC INC.

APPLICATION FOR EMPLOYMENT

PLEASE PRINT

Specific Position Applied For _____ Date _____

Was this position advertised? Yes No If yes, where? _____ When? _____

What other companies have you applied to recently? _____

Name _____ Social Security # _____

Address _____
Street Apt. # City State Zip

Telephone Number where you can be reached _____
Area Code / Phone Number

Are you at least 18 years of age? Yes No Military Status _____

Will you be able to perform the essential functions of the position for which you have applied? Yes No

If NO, what accommodation to this condition would make it possible for you to do this job? _____

On what date would you be available for work? _____

This job could require you to travel Monday through Friday on a statewide basis. Are you prepared to be gone overnight on this arrangement? Yes No

A license is required, please specify the type of license: OPERATORS COMMERCIAL (CDL)

List the following: License Number _____ Expiration Date _____

Have you had a motor vehicle accident or moving violation in the past 3 years? Yes No

If yes, explain: _____

List any trade licenses you may have: _____

Are you prepared to provide the craft tools as required for your trade? Yes No

List any craft training programs in which you have participated _____

Have you attended High School, Vocation/Technical School or College? Yes No

If YES, please specify _____

Voltmer Electric Inc. does not discriminate in hiring or employment on the basis of age, race, color, sex, religion, national origin or handicap.

VOLTMER ELECTRIC INC. IS AN EQUAL OPPORTUNITY EMPLOYER

Are you currently employed? Yes No If no, are you subject to recall? Yes No

LIST PREVIOUS EMPLOYMENT (ATTACH A SEPARATE SHEET IF NECESSARY - GO BACK 10 YEARS)

EMPLOYER _____
 ADDRESS _____
 DATES _____ JOB TITLE _____
 WAGE/RATE _____ BENEFITS _____
 REASON FOR LEAVING _____

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 DATES _____ JOB TITLE _____
 WAGE/RATE _____ BENEFITS _____
 REASON FOR LEAVING _____

During the past two years, have you ever 1.) Tested positive or 2.) refused to test on any pre-employment drug and alcohol test administered by an employer that you applied, but did not obtain employment for safety sensitive transportation work covered by DOT drug and alcohol testing rules? _____ Yes _____ No

GENERAL:

Who should be notified in case of emergency?

Name	Address	Area Code/Phone Number
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"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal, and I agree to hold my employer harmless in the event of my dismissal based thereon.

I authorize investigation of all statements contained herein and to do background checks to give you and all information concerning my previous employment and any pertinent information they may have, confidential or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

I realize that under certain provisions of Iowa law, pre-employment drug testing could be a condition of my employment. I also acknowledge that the employer may require drug testing at a subsequent time providing that proper advance notice of testing is provided.

I also recognize that I could be offered employment subject to appropriate medical examination and that such a report could nullify my ultimate employment by this employer. I agree to submit to physical examination if required.

I understand and agree that, if hired, my employment is for no definite period and may, regardless of the method of payment of my wages and salary, be terminated at any time without prior notice. If employment is obtained under this application, I will comply with all rules and policies of my employer."

I request disclosure of the nature and substance of all information on me in the credit bureau's files, including the sources of the information (except investigative sources) and identification of the receipts of all reports furnished within the last six months (or last two years if furnished for employment purposes).

Signature _____ Date _____

(Note: This application will be current for 30 days or until position is filled.)

VOLUNTARY SURVEY

Voltmer Inc. is required by state and federal laws to furnish statistical data and to maintain records of certain population characteristics of those applying for jobs with us. The information you supply will be used for statistical purposes only. If you are offered employment with Voltmer Inc., it will not be used as employment criteria. Voltmer Inc. is an equal employment opportunity employer supporting diversity in the workplace. Thank you for your cooperation in completing this form.

NAME: _____ **PHONE:** _____

ADDRESS: _____

DATE: _____ **POSITION APPLIED FOR:** _____

REFERRAL SOURCE: How did you learn of this position?

_____ Advertisement (list newspaper) _____

_____ Friend

_____ Relative

_____ Walk In

_____ Employment Agency (give name) _____

_____ Other (list source) _____

SEX: _____ Male _____ Female

ETHNIC ORIGIN:

_____ White _____ Hispanic _____ American Indian / Alaskan
 Native

_____ Black _____ Asian / Pacific Islander _____ Other

CHECK ANY OF THE FOLLOWING THAT ARE APPLICABLE:

_____ Vietnam Era Veteran _____ Disabled Veteran _____ Disabled Individual