

**EMPLOYMENT APPLICATION**  
**AN EQUAL OPPORTUNITY EMPLOYER**

Hourly \_\_\_\_\_  
Salary \_\_\_\_\_

Date Application Filed

Position Desired:

**PERSONAL INFORMATION**

(Print) Last Name

First

Middle

Social Security Number

Present Address

Phone Number

Are you 18 years or older?

Yes  No

Have you ever been convicted of a crime or are you presently charged with a felony? If so, where and when, and explain circumstances. \_\_\_\_\_

Describe any U.S. Military Service (Branch, Rank, Nature, and Date of Discharge) \_\_\_\_\_

Are you presently in the National Guard or Reserve? (If so, identify unit and any service obligations). \_\_\_\_\_

Any other name you have used in connection with employment, education, U.S. Military Service, or any criminal conviction or pending felony charge: \_\_\_\_\_

<b>EDUCATION</b>	<b>Name and Location of School</b>	<b>Number of Years Attended</b>	<b>Did You Graduate?</b>	<b>Subject Studied</b>
Grammar School	_____	_____	_____	_____
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Trade, Business or Correspondence School	_____	_____	_____	_____
General Subjects of Special Study or Research Work	_____	_____	_____	_____

**WORK HISTORY** (List all past periods of employment. Use additional sheet of paper if necessary.)

<b>Dates of Employment</b> Mo. Yr.	<b>Name of Company, Address &amp; Name of Immediate Supervisor</b>	<b>Type of Business</b>	<b>Job Title &amp; Type of Work Performed</b>	<b>Wage or Salary</b>	<b>Reason for Leaving</b>
From To					
From To					
From To					
From To					
From To					
From To					
From To					

**In Case of Emergency Notify:**

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**Name** \_\_\_\_\_ **Address** \_\_\_\_\_ **Phone No.** \_\_\_\_\_

Date you can start \_\_\_\_\_ Salary Desired \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

Have you ever applied to this Company before? \_\_\_\_\_ Where? \_\_\_\_\_ When? \_\_\_\_\_

Have you previously worked for this Company? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_

Where? \_\_\_\_\_ Position? \_\_\_\_\_

Relatives employed by Company? \_\_\_\_\_ Yes \_\_\_\_\_ Who? \_\_\_\_\_ No \_\_\_\_\_

Do you have any activities, commitments, or responsibilities (for example, school, other employment, etc.) which might, in any way, interfere with your ability to work full time, including overtime, in the position for which you are applying? \_\_\_\_\_

If employed here, do you expect to work on any other job? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, give nature of work and amount of time it requires. \_\_\_\_\_

\_\_\_\_\_

How much time did you miss from work in the past year? \_\_\_\_\_

Describe fully the nature of the work in your present (or most recent) job: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What special skills or knowledge do you have which will aid you in qualifying for employment? (Include tools and machines): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

Hired: Yes  No  Position \_\_\_\_\_ Dept. \_\_\_\_\_

Salary/Wage \_\_\_\_\_ Date Reporting to Work \_\_\_\_\_

Approved: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_  
                     Employment Manager                      Department Head                      General Manager

**READ CAREFULLY AND SIGN BELOW IF YOU AGREE  
TO THESE TERMS OF EMPLOYMENT:**

I, the undersigned applicant for employment, certify that the facts contained in this application are true and complete. I authorize and request my former employers, references and educational institutions, and any credit agencies or reporting services which have information about me, to give the Company all information and opinions about me in their possession; I hereby waive written notice of such release of information and opinions, and I release such former employers, references, educational institutions and credit agencies or reporting services from any liability or claim relating to such release of information and opinions. I also authorize and request federal, state and local governmental agencies to release to the Company any information requested concerning any criminal convictions on my record.

I understand and agree that all employment at the Company is on an at-will basis, and may be terminated by the employee or the Company at any time for any cause or no cause. I understand and agree that no one employed by the Company (except the Company's President by a specific written contract for a specific term of years naming the employee and signed by the employee and the President) has any authority to offer employment other than on an at-will basis. I also understand and agree to the Company's policy that the Company's decisions on all employment related matters are final, and are not subject to review or appeal outside the Company except as required by laws providing or requiring employers to provide specific employment standards and rights.

I agree that, except as directed otherwise by the Company, I will not disclose to anyone or use for my own purposes, any of the Company's confidential or proprietary information, either during or after my employment. I understand and agree that the Company's trade secrets, bidding, costs, pricing and marketing information and techniques, designs, methods of engineering and production, financial and market information, computer software, sources of supply, and customer names and information are confidential and proprietary information of the Company; I also agree that I will not make written or other copies of notes regarding these matters except as necessary to perform my job, and I agree that if my employment with the Company ends, I will deliver to the Company all material of any kind that I have relating to the Company, including any such copies or notes. I also agree that I will disclose and assign to the Company any invention, design or process which I conceive or develop while employed by the Company relating to the Company's business or to any product or service offered or being developed by the Company, and that all such designs or conceptions shall be the property of the Company.

I agree that the contents of any lockers, desks or other Company property I may be using, and of any of my own property I bring onto the Company's premises (including without limitation cars, packages and purses) may be inspected by the Company at any time, and I waive and promise not to make any claims against the Company (or its employees, owners, or agents) relating to such inspection.

I agree to submit to physical examinations permitted by law before and during my employment by a health care professional, at the request and expense of the Company, and I agree to disclose completely all information requested at such examinations about my physical and mental condition and medical history. I also agree that, before and during my employment, at the request and expense of the Company, I will cooperate in such medical tests (including blood, hair, urine, or other testing) as the Company requests to check for drugs or alcohol in my system, or for any other physical condition. I waive and release and promise not to make any claims against the Company (or any testing agency retained by it, or their employees, directors, owners and agents) relating to any such testing, or from lawful decisions made regarding my employment or termination of employment based upon the results of such testing or analysis.

I agree that the Company may disclose or discuss any information or opinions relating to me or my employment to employees of the Company or third parties, and I waive and release and promise not to make any claims against the Company (or its employees, owners or agents) relating to any such disclosure or discussion.

I agree that I will not commence any action or suit relating to my employment with the Company (or termination of the employment) more than one (1) year after the termination of my employment, and I agree to waive any statute of limitations to the contrary. I understand that this means that even if the law would give me the right to wait a longer time to make a claim, I am waiving that right, and that any claims not brought within one (1) year after my employment ends will be barred.

I agree to the above terms of employment. I agree that if any of the above commitments by me is ever found to be legally unenforceable as written, the particular agreement concerned shall be limited to allow its enforcement as far as legally possible. I understand and agree that no one other than the President by a written agreement with a specific named individual, has any authority to modify or announce modification of the above terms of employment and policies, or to make any exception to them, or to offer employment on any other terms. I understand and agree that, except as provided above, all benefits, programs, rules and policies of the Company are subject to exceptions or change at any time as decided by the Company.

I further agree to be governed and to abide by the rules and regulations of the Company.

Reference above to the Company includes its present and future parent and affiliated companies.

Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

**INDEPENDENT SAFETY PRODUCTS, INC.**

**EMPLOYMENT APPLICATION**

**AUTHORIZATION AND WAIVER**

I authorize and request my former employers, references, educational institutions, and any credit agencies or reporting services which may have information about me, to give the above-designated Company any and all information and opinions about me in their possession; I hereby waive written notice of such release of information and opinions, and I release such former employers, references, education institutions, and credit agencies or reporting services from any liability or claim relating to such release of information and opinions. I also authorize and request federal, state, and local governmental agencies to release to the above-designated Company any information requested concerning any criminal convictions on my record. A photocopy of this signed authorization and waiver shall be valid as an original.

Dated \_\_\_\_\_ Signature \_\_\_\_\_