

APPLICATION FOR EMPLOYMENT CORPORATE OFFICES & VIRGINIA OPERATIONS

AN EQUAL OPPORTUNITY EMPLOYER M/F/D/V

It is the policy of Strongwell that there will be no unlawful discrimination against any applicant for employment because of race, color, creed, religion, sex, age, national origin, marital status, or disability, or due to the fact that he/she is a military veteran, disabled veteran or a veteran of the Vietnam era. Strongwell complies with applicable federal, state and local laws prohibiting discrimination in employment in every jurisdiction in which it maintains facilities. Strongwell also provides "reasonable accommodations" to qualified individuals with disabilities, in accordance with the Americans with Disabilities Act and applicable state and local laws.

Personal Data					
Status Sought	Regular	Part-Time/	Temporary Sur	mmer	
Name (First, Middle, Last)				Phone No.	
Street Address				Email	
City		State	Zip Code	Are you under 18 years of age? Yes No	
Education Record					
HIGH SCHOOL			City & State		
Total No. Years Attended			Did You Gradua	ate Yes No	
Major Course			Minor Course		
COLLEGE/UNIVERSITY			City & State		
Did You Graduate Yes N	No Majo	r	Minor	Degree	
Honors			Total No. of Yea	ars Attended	
Grade Point Average	Out	ıf	Quarterly Hrs.	Semester Hrs.	
TRADE/TECHNICAL SCHOOL			City & State		
Type of Certificate Received					
Total Time Attended	Years	3	Months	Hours Equivalency	
COLLEGE/OTHER OR GRADUATE EDUCATION City & State					
Did You Graduate Yes I	No Majo	r	Minor	Degree	
Honors			Total No. of Yea	ars Attended	
Grade Point Average	Out	f			
Thesis Subject (or Research Ef	fort)				
COLLEGE/OTHER OR GRADUATE EDUCATION				City & State	
Did You Graduate Yes	No Majo	r	Minor	Degree	
Honors			Total No. of Yea	ars Attended	
Grade Point Average	Out o	of			
Thesis Subject (or Research Ef	fort)				

Employment History List most recent employer first. Attach additional sheet if necessary.							
1. COMPANY				Position			
City		State		Phone			
Employed From	То	Supervisor		Annual Salary			
Responsibilities							
			,				
List 3 Fellow Workers	1.		2.	3.			
Reasons for Leaving							
2. COMPANY				Position			
City		State		Phone			
Employed From	То	Supervisor		Annual Salary			
Responsibilities							
			1				
			1				
List 3 Fellow Workers	1.		2.	3.			
Reasons for Leaving			1				
3. COMPANY				Position			
City		State	,	Phone			
Employed From	То	Supervisor	,	Annual Salary			
Responsibilities							
			1				
List 3 Fellow Workers	1.		2.	3.			
Reasons for Leaving							
4. COMPANY				Position			
City		State		Phone			
Employed From	То	Supervisor		Annual Salary			
Responsibilities							
List 3 Fellow Workers	1.		2.	3.			
Reasons for Leaving							
5. COMPANY				Position			
City		State		Phone			
Employed From	То	Supervisor	'	Annual Salary			
Responsibilities			'				
			,				
		,	1				
List 3 Fellow Workers	1.	,	2.	3.			
Reasons for Leaving		,	1				

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Additional Information					
May we call your present employer? Yes No					
When required by the job, are you willing to work: WEEKENI	OS Yes	No	SHIFTS	Yes	No
Type of position desired:					
Starting pay range desired: \$					
Have you ever worked for this company? Yes No	If "Yes," give d	ate last wor	ked:		
Have you previously applied for employment at Strongwell?	Yes No	If "Yes,"	give approxin	nate date:	
Have you ever been convicted of or plead guilty to a felony or marijuana offenses, but including distribution of or intent to diswhen, where, and disposition. Your answer is reviewed as on terms of the nature, severity, and date of the offense.	stribute marijuai	na offenses)? Yes	No I	f "Yes," state nature of offense,
Has your employment ever been involuntarily terminated?	Yes No	If "Yes," e	explain:		
If related to anyone in our employ, state name and departmen	nt:				
If hired, I agree to comply with all the policies the foregoing statements are true and correct, ar application unfavorably, and I authorize this comparincluding obtaining any police or criminal records. their opinions on these matters without any liability or receiving this information or opinions. I authorize my former and present employence concerning my performance and employment recomaly be considered as sufficient cause for rejection. I attest to the fact that I have no employment employment in any capacity or area of Strongwell effor an indefinite period of time. I may resign from Strongwell at any time, with or without cause, and we passing a drug screening test, and that my continui be required to take during my employment. I herebarmless for release of any information concerning their directors, officers, stockholders, and employment makes every effort to accommod mandatory overtime, shift work, rotating work scheunderstand that the company reserves sole and exist an application for employment and that no employment, I will furnish proof of my identity; probirth; military discharge forms; and appropriate acades.	es of this cond that I have by to conduct I also author for any dame of the application o	mpany. I ave not with any investigation, or with either any time any time any time and hold the o Strongwithe use all prefer work schot to detern contract y legally in the strong of the school of th	affirm and of thheld any estigation it company to estigation it company to escent and escent and estimated in the company to establish the control of the control of this information of the control of the ences, but indicated in the control of the ences, but indicated in the ences, but in the control of the ences, but in the ences in the e	declare, fact that consider releases ements or form am ement will be formation my paist, testing release formations in essert than I signme offered	under penalty of perjury, that as at would, if disclosed, affect mers necessary on this application e such information together with the directly or indirectly by giving any information they may have or omissions on this application me employed by the company. The employer that will prohibit mer ause, and may be discharged by the company ause, and may be discharged by the company and medical clinical earn hold harmless Strongwell and hold harmless Strongwell and hold harmless Strongwell meds may, at times, required Monday through Friday. I further understand that this or implied. In the event of mere such as the world provided in the event of mere and would be such as the world provided in the event of mere and would be such as the world provided in the event of mere and world provided in the event of mere and world provided in the world provided in the event of mere and world provided in the event of the event of mere and world provided in the event of the even
Signature of Applicant_			Date	<u>. </u>	

BE SURE TO SIGN AND DATE THIS APPLICATION