

CRISPIN MULTIPLEX INC.

In order to be considered for employment at Crispin Multiplex, Inc., you will be required to pass a drug test.

Payment for the drug test to the doctor's office or hospital will be your responsibility.

If you are interviewed for employment and considered for hiring, you will be instructed to submit the drug test.

Once you have passed the drug test, the company has received a certified copy of the results, and after the new employment 90-day probationary period has passed; you will be reimbursed for the drug screening.

If you choose to leave or are terminated before the end of your probationary period, then you will not be reimbursed.

Crispin Multiplex has a "ZERO TOLERANCE" policy for drug use.

Valid photo ID is required.

If you have any doubt that you will be able to pass a drug test, please do not apply.

Signature: _____

Date: _____

Applicant: By signing this document, you acknowledge that you have read and understand the above policy.

Crispin Multiplex, Inc.

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Cell: _____

Date Available: _____ Social Security No.: _____ Pay Expected: \$ _____

Position Applied for: _____

Where did you hear about job opportunities at Crispin? _____

Are you willing to work overtime is asked? YES NO

Apart from absence for religious observance, are you available for full-time work? YES NO
 If not, what hours can you work? _____

Are you a citizen of the United States? YES NO
 If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO
 If yes, when? _____

Have you ever been convicted of any crimes in the past 10 years? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO
 Degree: _____

Other Special Training

Other special training or skills (languages, machine operation, etc.)

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

References

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____