

Please complete all pages and fax to 866-425-2241

---

---

**DISCLOSURE AND RELEASE of INFORMATION**

---

---

In connection with my application for employment (including contract for services) with you, I understand that consumer reports or background checks which may contain public record information may be requested by **Quantum Components Limited** and/or its agents. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, etc., from federal, state and other agencies which maintain such records, as well as information concerning previous driving record request made by others for such state agencies and state-provided driving records.

I authorize without reservation, any party or agency contacted by **Quantum Components Limited** and/or its agents, upon proper identification, the nature and substance of all information in its files on me at the time of my request, including the sources of information; and the recipients of any reports on me which the agents have previously furnished within the two (2) years preceding my request. I hereby consent **Quantum Components Limited** and/or its agents to obtain the above information and I agree that such information which **Quantum Components Limited** and/or its agents has or obtains, including my employment history with **Quantum Components Limited** may be used anytime in my employment evaluation.

I hereby authorize procurements of consumer report(s). If hired (or contracted) this authorization shall remain on file and shall serve as ongoing authorization for you to procure consumer reports at any time during my employment (or contract) period.

I understand that I may request a copy of this Disclosure and Release form.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

---

---

## APPLICANT INSTRUCTIONS

---

---

Thank you for your interest in employment with our Company. We appreciate your application, and look forward to the possibility of you joining our team. This sheet is for your information. Please read it carefully. Ask questions if you do not understand a section.

***Please print all information.*** Be certain that all questions are completely answered. Incomplete information forms will not be considered. Use the abbreviation “N/A” if a particular provision or section in the form is not applicable to you. If you need additional space, you may use the back of the form.

This application form is intended for use in evaluating your qualifications for employment only. False or misleading information given in this form or during the interviewing process are grounds for terminating the application process or, if discovered after employment, for terminating employment.

Employment decisions are made solely on the basis of qualification to perform the work for which you are applying. Qualifications include education, training, and work experience. Credentials and experience will be verified through schools, former employers, and any other applicable sources such as a background check and credit history.

As an Equal Opportunity Employer, we make decisions to hire and promote without regard to race, color, creed, national origin, sex, physical or mental disability (unrelated to ability to do the job), or age (as defined by law). We are a drug free company and all applicants will be drug tested before hire.

You should understand that the position for which you are applying is considered at-will, which means that either you or the company can terminate employment for any reason or no reason at any time. No one except the company president has the authority to amend this agreement.

I have read and understood the above information.

---

Print Name

---

Signature

---

Date

# APPLICATION FOR EMPLOYMENT

(Please Print)

Position Desired \_\_\_\_\_ Date \_\_\_\_\_

How did you learn about us?

Advertisement/Web    Walk-In    Friend/relative (name) \_\_\_\_\_

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip \_\_\_\_\_

Telephone (     ) \_\_\_\_\_ Cell (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_

Email \_\_\_\_\_ Social Security # \_\_\_\_\_

Are you over 18 years of age?  Yes    No

If under 18 years of age, can you provide proof of your eligibility to work?  Yes    No

Have you ever filed an application with us before?  Yes    No

Are you physically or otherwise unable to perform the duties of the job for which you are applying (this includes lift/carrying heavy loads of up to 35 pounds)?  Yes    No

If yes, please describe \_\_\_\_\_

Are you currently employed?  Yes    No

May we contact your present employer?  Yes    No

When would you be available for work? \_\_\_\_\_

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes    No

*Proof of citizenship or immigration status will be required upon employment.*

Desired:                     Full Time        Part Time        Shift Work        Temporary

Can you travel if a job requires it?  Yes    No

Have you ever been convicted of a felony? \*  Yes    No

City/State \_\_\_\_\_ Charge \_\_\_\_\_

Please explain

\*Conviction of a felony will not necessarily bar you from employment.

**EDUCATION**

Circle the highest grade completed in school:

1    2    3    4    5    6    7    8    9    10    11    12    13    14    15    16

Name of last school attended: \_\_\_\_\_

Vocational or Colleges attended: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Certifications/Awards: \_\_\_\_\_

\_\_\_\_\_  
List names of friends or relatives now employed by **Quantum Components Limited**:

\_\_\_\_\_

**Emergency contact information:**

*This information is to facilitate contact in the event of an emergency and is not used in the selection process.*

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Cell/Home Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Their place of employment

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Relationship to you

\_\_\_\_\_

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

**EMPLOYMENT RECORDS**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude references which indicate race, color, religion, national origin, handicap or other protected status.

---

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Position/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

DATES EMPLOYED	
From:	To:
HOURLY RATE/SALARY	
Beginning:	Ending:

Reason for leaving: \_\_\_\_\_

---

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Position/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

DATES EMPLOYED	
From:	To:
HOURLY RATE/SALARY	
Beginning:	Ending:

Reason for leaving: \_\_\_\_\_

---

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Position/Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

DATES EMPLOYED	
From:	To:
HOURLY RATE/SALARY	
Beginning:	Ending:

Reason for leaving: \_\_\_\_\_

Use this space to give us other information about your personal skills or qualities, work style, interpersonal ability or communication skills, which would further qualify you for this job. \_\_\_\_\_

---

---

---

Complete the following information only if applying for a position that requires use of a vehicle while conducting company business. If hired, your information may be verified with a Motor Vehicle Report.

How many traffic violations have you had during the last two years? \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ State \_\_\_\_\_

**REFERENCES**

Name only those persons who are familiar with your work capabilities. Do not list relatives.

---

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Position \_\_\_\_\_ Years Known: \_\_\_\_\_

---

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Position \_\_\_\_\_ Years Known: \_\_\_\_\_

---

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as necessary in arriving at an employment decision.

I also understand that any information, technical data, or know-how, including but not limited to products, services, customers, markets, process, designs, marketing or finances that may be revealed to me will not be disclosed by myself any person outside the company, at any time during the application process or my subsequent employment, or after my employment at Quantum Components Ltd, if they occur.

This application for employment shall be considered active for a period of time not to exceed 180 days (6 months).

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