

APPLICATION FOR EMPLOYMENT

Hy-Pro Corporation

An Equal Opportunity Employer.

Reasonable accomodation will be provided as required by law.

If you are offered a position at Hy-Pro Corporation, your employment is at-will, unless otherwise altered through a collective bargaining agreement or an individual contract that is in writing and signed by the President of Hy-Pro or his designated representative. You are free to resign at any time. Similarly, Hy-Pro is free to conclude the employment relationship at any time.

| | | | | | |
|--|---|----------------|--|--------------|--------|
| Last Name | First Name | Middle Initial | | | |
| Street Address | City | State | Zip Code | Phone Number | |
| If hired, can you provide evidence of legal eligibility to work in the U.S.? Yes: _____ No: _____ | | | Any offer of employment is conditioned upon completing form I-9 and providing the appropriate documents for identity and work authorization. | | |
| Name of High School Attended: | City | State | Graduate? | GED? | |
| Name of College or Technical School: | City | State | Graduate? | Degree? | Major: |
| Are you presently enrolled in school? Yes: _____ No: _____ | If yes, give name & address of school and expected degree date: | | | | |
| List any job-related skills or accomplishments, including military service: | | | | | |

-Your Availability For Work-

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|---|--------|---------|-----------|----------|---|----------|--------|
| From: | | | | | | | |
| To: | | | | | | | |
| Total hours per week you are available to work: | | | | | Are you available to work nights? Yes: _____ No: _____ | | |

-Provide Three References Who Are Not Former Employers Who We May Contact-

| Name and Occupation: | How do you know them, and for how long? | Phone Number: |
|----------------------|---|---------------|
| | | |
| | | |
| | | |

Have you ever been convicted for a crime? (Exclude convictions that have been sealed, expunged, or legally eradicated, and misdemeanor convictions for which probation was completed and the case dismissed).

Yes: _____ No: _____

If yes, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case. This company will not deny employment to any applicant solely because the person has been convicted of a crime. The company, however, may consider the nature, date and circumstances of the offense as well as whether the offense is relevant to the duties of the position applied for.

Your Employment History

List names of employers with present or last employer listed first.

| May we contact current employers before you are offered a position? | | | | Yes: | No: |
|--|--|--|-----------------------|-------------|-------------|
| Name of Employer: | | | Job Title: | | |
| Address: | | | Duties: | | |
| City: | | | State: | | Zip Code: |
| Supervisor: | | | Telephone: | | |
| Address: | | | Dates of Employment: | | |
| City: | | | From: | | To: |
| City: | | | Hourly pay or salary: | | |
| City: | | | Starting Pay: | | Ending Pay: |
| Supervisor: | | | Telephone: | | |
| Name of Employer: | | | Job Title: | | |
| Address: | | | Duties: | | |
| City: | | | State: | | Zip Code: |
| Supervisor: | | | Telephone: | | |
| Address: | | | Dates of Employment: | | |
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| City: | | | Hourly pay or salary: | | |
| City: | | | Starting Pay: | | Ending Pay: |
| Supervisor: | | | Telephone: | | |

CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

| | |
|------------|-------|
| Signature: | Date: |
|------------|-------|