Unytite, Inc., is an equal opportunity employer and does not discriminate in any aspect of employment on the basis of race, color, or religion, sex, pregnancy, sexual orientation, natural origin, marital status, age, ancestry, veteran status, physical or mental disability, or any other legally protected status.

Please exclude any information, which may indicate your race, color, religion sex, pregnancy, sexual orientation, national origin, marital status, age, ancestry, veteran status, physical or mental disability, or any other legally protected status.

Date:			
Name:			Telephone No.:
Last	First	MI	Cell / Message Phone:
Address:			
No.	Street		
City	State		Zip Code
Type of employment desire	ed: Full Time	Part Tin	ne
Position Applied for:			Salary Desired:
Date Available for Work:			Referred to Unytite By:
Are you willing to work an	y shift? Yes	No	
Are you willing to work ov	vertime if required?	Yes	No
What hours are you availab	ole to work?		
Can you perform the function	ions of any job with or w	ithout reason	nable accommodations? Yes No
-	e certain physical charact	eristics that	make them difficult or impossible for some people to
do. Can You Read and write Engl	ish and be able to commun	icate and und	erstand instructions effectively, both verbally and in
writing?	ish, and be able to commun		• •
	stand basic arithmetic?	Y	
Sit, Stand, Kneel, Cr	ouch and stoop?	Y	
Lift up to 50 lbs.?		Y	
Work around oil and	l oil mist?	Y	es No
If you answered NO to any	of the above questions p	olease explai	n:
Are you at Least 18 years old	? Yes No	If hired, car	you furnish proof of your age? Yes No
Are you legally authorized to			
Do you have any relatives or	friends working at Unytite,	Inc.?	Yes No If yes please provide name:

EDUCATION		
Circle highest Grade Completed:		
High School910College, Trade12	$\begin{array}{ccc} 11 & 1 \\ 3 & 2 \end{array}$	2 4
Graduate Studies	3 2	÷
If you did not graduate from High School, did you com	plete vour G E D ?	Yes No
n you ald not graduite from frigh Sensor, ald you com	piete your Ollibit	10510
HIGH SCHOOL		
School Name:		
City:	S	tate:
COLLEGE/UNIVERSITY		
School Name:		
City:	S	tate:
Major/Minor:	Graduate	d:YesNo
Degree: Associates Bachelors	Masters	
VOCATIONAL/BUSINESS/OTHER		
School Name:		
City:	S	tate:
Course of Study:	Graduate	d: Yes No
· · · · · · · · · · · · · · · · · · ·	-	
Have you ever applied for a position with Unytite, Inc. before?		
If yes: When?	what position?	
Have you ever worked for Unytite, Inc. before?	Yes	No
If yes: When?	What Position?	

WORK EXPERIENCE

Please list all employment for the past 10 years, including times of not working, starting with the most recent position. If there is not a 10-year history, please fill out as far back as possible. All information MUST be completed. You may attach a resume, but not in place of completing the required information.

Employed From://	Employed Until://		
Company Name:			
Company Address:			
Supervisor's Name:	Supervisor Phone Number:		
Job Title:			
Duties & Responsibilities:			
Starting Salary: \$/hr.	Ending Salary: \$/hr.		
Reason for leaving:			
Employed From:/	Employed Until:/		
Company Name:			
Company Address:			
Supervisor's Name:	Supervisor Phone Number:		
Job Title:			
Duties & Responsibilities:			
Starting Salary: \$/hr.	Ending Salary: \$/hr.		
Reason for leaving:			
Employed From:/	Employed Until:/		
Company Name:			
Company Address:			
Supervisor's Name:	Supervisor Phone Number:		
Job Title:			
Duties & Responsibilities:			
Starting Salary: \$/hr.	Ending Salary: \$/hr.		
Reason for leaving:			

WORK EXPERIENCE (Continued)

Please list all employment for the past 10 years, including times of not working, starting with the most recent position. If there is not a 10-year history, please fill out as far back as possible. All information MUST be completed. You may attach a resume, but not in place of completing the required information.

Employed From://	Employed Until://
Company Name:	
Company Address:	
Supervisor's Name:	Supervisor Phone Number:
Job Title:	
Duties & Responsibilities:	
Starting Salary: \$/hr.	Ending Salary: \$/hr.
Reason for leaving:	
Employed From:/	Employed Until:/
Company Name:	
Company Address:	
Supervisor's Name:	Supervisor Phone Number:
Job Title:	
Duties & Responsibilities:	
Starting Salary: \$/hr.	Ending Salary: \$/hr.
Reason for leaving:	
Employed From:/	Employed Until:/
Company Name:	
Company Address:	
Supervisor's Name:	Supervisor Phone Number:
Job Title:	
Duties & Responsibilities:	
Starting Salary: \$/hr.	Ending Salary: \$/hr.

SKILLS

INDUSTRIAL

Assembly	Yrs
Electronic Assembly	Yrs
Forklift	Yrs
General Labor	Yrs
Inspection	Yrs
Material Handling	<u> </u>
Packaging	Yrs
Shipping & Receiving	Yrs
Sorting	Yrs
Warehouse	Yrs

EXPLAIN: Where, When, What Type

INDUSTRIAL EQUIPMENT

Blue Prints	Yrs
Calipers	Yrs
Micrometers	Yrs
Tools	Yrs

MACHINE OPERATORS/SKILLED POSITIONS

CNC	Yrs
Drill Press	Yrs
Grinder	Yrs
Crane	Yrs
Hoist	Yrs
Lathe	Yrs
Metal Shear	Yrs
Punch Press	Yrs
Set Up	Yrs
Electrician	Yrs
Machinist	Yrs
Machine Maintenance	Yrs
Tool and Die	Yrs
Welder	Yrs
Auto Mechanic	Yrs
Diesel Mechanic	Yrs
Lab Technician	Yrs



WORK REFERENCES

Name	Company	Title	Address	Phone Number

ACKNOWLEDGEMENTS

Please read this section carefully

The information contained in this application is true to the best of my knowledge and belief. I understand that any misrepresentation of fact, as stated or implied, in my application, other employment documents, or interview may be sufficient reason for not hiring me and/or dismissal.

I understand and agree that all information furnished in this application may be verified by Unytite, Inc. or its authorized representative. I waive any right I may have to be notified by any individuals and organizations named in this application prior to the release of any information to Unytite, Inc. I further authorize all individuals and organizations named in this application to give Unytite all information relative to such verification. I hereby release such individuals and organizations and Unytite, Inc from any and all liability for any claim or damage resulting thereof.

I understand that Unytite, Inc. is not obligated to provide employment and that I am not obligated to accept employment. Nothing in this application, or in any prior or subsequent oral or written statement, is intended to create any contract of employment or to create any rights in the nature of a contract of employment. This application does not bind either party for a specific period of time regarding employment. If hired, nothing in this application shall restrict my rights as an employee or Unytite's right as an employer to terminate my employment at any time.

Signature (sign, no not print) _____ Date_____

DRUG FREE WORKFORCE POLICY

It is Unytite's policy to achieve a drug-free workforce and to provide a workplace that is free from the illegal manufacture, distribution, abuse, possession, and/or use of drugs or controlled substances. All applicants for employment must take and pass a drug test after receiving an initial offer of employment. Any failure to take the test at scheduled times may disqualify the applicant from employment. All applicants' rights to confidentiality and privacy shall be protected in accordance with the law.

CONSENT FOR DRUG TESTING

I hereby consent to the urinalysis test and/or other drug screening to determine the presence of drugs or their metabolites in my system. I also consent to the release of these tests and other relevant medical information to Unytite, Inc. I hereby release and agree to hold Unytite, the collection facility, the testing laboratory and their employees and agents harmless from any liability to me based upon the testing procedure of the reporting of the test results.

Signature (sign, no not print)_____

Date

VOLUNTARY EEO IDENTIFICATION

Various agencies of the United States Government require employers to maintain information on applicants pertaining to ⁻actors such as race, sex, and type of position for which an individual applies. The information requested on this sheet is compliance with certain record keeping requirements. The Company believes all persons are entitled to equal employment opportunities and does not discriminate against it employees or applicants for employment because of race, color, sex, religion, national origin, disability, veteran status, age, marital status or any other protected group status.

Name			Date			
Posit	ion Applied for:					
Socia	al Security No					
· -			Month/Day/Year			
Race/	/Ethnic Data:					
[White (Non-Hispanic)		Asian or Pacific Islander		American Indian or Alaskan Native	
[Black (Non-Hispanic)		Hispanic			
Regulations issued by the U.S. Department of Labor with respect to disabled individuals, disabled veterans, and Vietnam Era veterans require that federal contractors provide an opportunity for self-identification to candidates seeking employment. Such self-identification is submitted on a voluntary basis, on a confidential basis, for use only in accordance with regulations, and without subjecting the individual to adverse treatment.						
Disab	bled/Veteran Classification(s): Disabled Person		Vietnam Era Veteran		Special Disabled Veteran (30% or more disability)	

EXPLANATION OF THE CATEGORIES:

White (Non-Hispanic panic origin): Persons having origins in any of the original peoples of Europe, North Africa or the Middle East

Black (Non-Hispanic): Persons having origins in any of the black racial groups of Africa.

Asian or Pacific Islander: Persons having origins in any of the original peoples of the Far East, Southeast Asia, the Pacific Islands or the Indian subcontinent including. for example, China, Japan, Korea, the Philippines, Samoa, India, and Pakistan

Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South America or other Spanish culture or origin, regardless of race.

American Indian or Alaskan Native: Persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.

Disabled Individual: Federal regulations define a disabled person as one who (I) has a physical or mental impairment which substantially limits one or more of such person's major life activities, (2) has a history of such impairment, or (3) is regarded as having such an impairment.

Vietnam Era Veteran: Federal regulations define a veteran of the Vietnam Era as one who (1) served on active duty for a period of more Than 180 days, any part of which occurred between August 5, 1964, -and May 7, 1975, and was discharged or released with other than a dishonorable discharge, or (2) was discharged or released from active duty for a service connected disability if any part of such active duty *was* performed between August 5, 1964, and May 7, 1975.

Special Disabled Veteran: Federal regulations define a special disabled veteran as one who (1) is entitled to compensation under laws administered by the Veterans' Administration for a disability rated 30% or more, or (2) was discharged or released from active duty because of a service-connected disability.

AN EQUAL OPPORTUNITY EMPLOYER