EMPLOYMENT APPLICATION

Please complete the entire application.

| 1. Employer Info | . Employer Information | | | | |
|---|---|--|--|--|--|
| Employer: Address: City/State/ZIP: Telephone: | Branch Ironworks, LLC 7733 E. FM 917 Alvarado, Texas 76009 817.783.5183 | | | | |
| applicants and employ | nch Ironworks, LLC to provide equal employment opportunities to all yees without regard to any legally protected status such as race, color, and origin, age, disability or veteran status. | | | | |
| 2. Applicant Info | ormation | | | | |
| Home Address: City/State/ZIP: Number of years at th Daytime phone: Mobile phone: Social Security Numb Driver's License (Stat Is License a Valid Dri | Evening phone: oer: | | | | |
| 3. Emergency Co | ontact | | | | |
| Contact Name: Relationship to you: Address: City/State/ZIP: | eted if you are involved in an emergency? | | | | |
| Daytime phone: | Evening phone: | | | | |
| 4.Job Position Applie | d For: Shop Field | | | | |



5.Salary Desired: \$ _____ per ____

|). | Who referred you to our company? Do you have any friends or relative | | here? If yes, pleas | e list here: | - |
|------------|---|---------------|---------------------|--------------|------|
| ' . | Have you applied to our company I If yes, when? | | Yes | No | |
| 3. | Are you at least 18 years old? | Yes | No | | |
|). | How will you get to work? | | | | |
| 0. | Are you willing to work any shift, if no, please state any limitations: | | thts and weekends | ? Yes | _ No |
| 1. | If applicable, are you available to v | vork overtim | e? Yes | No | |
| 2. | If you are offered employment, wh | en would yo | u be available to b | egin work? | |
| 3. | If hired, are you able to submit pro employment in the United States? | | | for | |
| 1. | Are you able to perform the essention without reasonable accommodate | | | = | |
| | What reasonable accommodation, i | if any, would | you request? | | |
| 5. | Have you ever been convicted of a | felony or m | sdemeanor? | | |
| | Yes, I was convicted of | | | on | |
| | Yes, I was convicted of (city | y), | (state) | | |
| | No | | | | |

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.



16. Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

| <u>Skill</u> | Years of Experience |
|--|---------------------|
| []Skytrak []Forklift []Boomlift []Scissor Lift []Portable Grinders []Ironworker Punch/Shear []Overhead Crane []Reading of Tape Measure []Welder (Stick) []Welder (Mig) []Magnetic Drill []Hand Drill []Screw Gun []Cold Cut Saw []Band Saw []Cutting Torch | Years of Experience |
| []Chop Saw | |

17. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.



| Employer Name: |
|--|
| Supervisor Name: |
| Address: |
| City/State/ZIP: |
| Job Duties: |
| Reason for Leaving: |
| Dates of Employment (Month/Year): |
| Employer Name: |
| Supervisor Name: |
| Address: |
| City/State/ZIP: |
| Job Duties: |
| Reason for Leaving: |
| Dates of Employment (Month/Year): |
| Employer Name: |
| Supervisor Name: |
| Address: |
| City/State/ZIP: |
| Job Duties: |
| Reason for Leaving: |
| Dates of Employment (Month/Year): |
| 18. Applicant's Education and Training |
| College/University Name and Address |
| Did you receive a degree? Yes No If yes, degree(s) received: |
| High School/GED Name and Address |
| Did you receive a degree? Yes No |
| Other Training (graduate, technical, vocational): |
| Please indicate any current professional licenses or certifications that you hold: |
| Awards, Honors, Special Achievements: |



| Military Service: |
|---|
| Yes No |
| Branch: |
| Specialized Training: |
| |
| 19. References |
| List any two non-relatives who would be willing to provide a reference for you. |
| · |
| Name: |
| Address: |
| City/State/ZIP: |
| Telephone: |
| Relationship: |
| |
| Name: |
| Address: |
| Address: City/State/ZIP: |
| Telephone: |
| Relationship: |
| |
| 20. Please provide any other information that you believe should be considered, including |
| whether you are bound by any agreement with any current employer: |
| |
| |



CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Branch Ironworks, LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

| I HAVE CAREFULLY READ THE ABO AGREE TO ITS TERMS. | VE CERTIFICATION AND I UNDERSTAND A | ND |
|--|-------------------------------------|----|
| | | |
| APPLICANT SIGNATURE | DATE | |

