



1/16/2009

### EMPLOYMENT APPLICATION

Equal Opportunity Employer

POSITION desired or area of interest?

When are you AVAILABLE to start work?  /  /2009

Name

Last First Middle

Address

No. and Street or Apt. # City State Zip

Home phone no.  -  -  E-mail address

Cell phone no.  -  -  Other e-mail

Are you 18 years or older? Yes  No  Do you have reliable transportation? Yes  No

How far will you commute?  miles Do you have a Social Security Number? Yes  No

Shift Desired?  1<sup>st</sup>  2<sup>nd</sup>  3<sup>rd</sup>  Any  Schedule desired?  Full Time  Part Time  Either

If needed can you work weekends and/or holidays? Yes  No

Are you eligible for employment in the U.S.? Yes  No  Alien No., if any

What is an acceptable starting pay range? \$  .  per Hr  Yr

Have you previously applied at WellsBrooke? Yes  No  If so, date  /  /

Have you ever been employed by WellsBrooke? Yes  No  If so, date  /  /

Have you ever been known by or used any other name? Yes  No

If yes, explain.

How did you hear about WellsBrooke? WellsBrooke Website  Hotjobs  Michigan Talent Bank  Careerbuilder  Other  explain \_\_\_\_\_



1/16/2009

**EDUCATION**

List the name of the schools which you have attended. Please complete the dates of graduation.

|             | Name of School | City | State | Grad Date |
|-------------|----------------|------|-------|-----------|
| High School |                |      |       |           |
| Vocational  |                |      |       |           |
| College     |                |      |       |           |
| Other       |                |      |       |           |

**EMPLOYMENT HISTORY**

|                             |   |                    |              |                                |             |
|-----------------------------|---|--------------------|--------------|--------------------------------|-------------|
| 1. Present or Last Employer |   | Employer's Address |              | Employer's Phone Number        |             |
| Your Title                  | Months & Years Employed in this Position<br>From / To / |                    | Total Months | Average Hours<br>/Per Week     | Last Salary |
| Immediate Supervisor's Name | Reason for Leaving                                      |                    |              | Number of Employees Supervised |             |
| Specific Duties:            |   |                    |              |                                |             |
| 2. Present or Last Employer |   | Employer's Address |              | Employer's Phone Number        |             |
| Your Title                  | Months & Years Employed in this Position<br>From / To / |                    | Total Months | Average Hours<br>/Per Week     | Last Salary |
| Immediate Supervisor's Name | Reason for Leaving                                      |                    |              | Number of Employees Supervised |             |
| Specific Duties:            |   |                    |              |                                |             |
| 3. Present or Last Employer |   | Employer's Address |              | Employer's Phone Number        |             |
| Your Title                  | Months & Years Employed in this Position<br>From / To / |                    | Total Months | Average Hours<br>/Per Week     | Last Salary |
| Immediate Supervisor's Name | Reason for Leaving                                      |                    |              | Number of Employees Supervised |             |
| Specific Duties:            |   |                    |              |                                |             |



1/16/2009

|                             |  |   |  |                                |                         |
|-----------------------------|--|---|--|--------------------------------|-------------------------|
| 4. Present or Last Employer |  | Employer's Address  |  | Employer's Phone Number        |                         |
| Your Title                  |  | Months & Years Employed in this Position<br>From     /     To     / |  | Total Months                   | Average Hours /Per Week |
| Immediate Supervisor's Name |  | Reason for Leaving  |  | Number of Employees Supervised |                         |
| Specific Duties:            |  |   |  |                                |                         |
|                             |  |   |  |                                |                         |

**NOTICE OF HANDICAPPER RIGHTS**

If you have a physical, mental or medical impairment which would interfere with your ability to perform in a position at the Company, but which may be accommodated by, for instance, the purchasing of equipment or devices, the provision of readers or interpreters or the restructuring or altering of work schedules, Michigan law requires that you notify the Company in writing of your need for accommodation within 182 days after you become aware or should reasonably have known that the accommodation was needed.

**MILITARY SERVICE**

|  |  |                        |    |  |
|--|--|------------------------|----|--|
| If you have served, dates of service were from |  |                        | to |  |
| Branch   |  | Highest Rank or Rating |    |  |
| Reserve Status                                 |  |                        |    |  |

**CONVICTION RECORD**

|  |  |
|--|--|
| Have you ever been convicted of a crime? Yes <input type="checkbox"/> No <input type="checkbox"/>  |  |
| A. If yes, explain when, where and the nature of all criminal convictions.   |  |
|  |  |
|  |  |
| B. Are there any felony charges pending against you at present? Yes <input type="checkbox"/> No <input type="checkbox"/>   |  |
| If yes, describe:  |  |
|  |  |
| Company policy does not render conviction of a crime an absolute bar to employment. Such facts as the seriousness and nature of the offense or violation, how many years ago the offense occurred and rehabilitation will be considered by the Company in relation to the specific job which you seek. |  |



1/16/2009

**APPLICANTS' CERTIFICATION AND AGREEMENT (please read carefully)**

**Certification of Truthfulness.** I certify that all statements on this Application for Employment are true to the best of my knowledge. I understand and agree that the statements made herein may be investigated and, if found to be false, will be sufficient reason for not being employed, or if employed, will be cause for dismissal, when discovered.

**References.** I authorize the references I have listed above and any of my prior or current employers, to give you any and all information concerning my previous employment, including any disciplinary information, and any pertinent information they may have, personal or otherwise, and in exchange for my consideration of employment, I release all parties from all liability for any damage that may result for furnishing information to you. Also, I hereby waive written notice to me that employment information is being provided by any person or organization.

**Employment At-Will.** If hired, in consideration of my employment, I agree to abide by the rules, policies and procedures of the Company. I further agree that my employment with the Company is at-will and can be terminated for any reason, with or without cause, and with or without notice at any time, at the option of either the Company or myself. I understand that the Company may, from time to time, make unilateral changes in its rules, regulations and personnel practices and policies which will affect me and that my employment may be subject to unilateral adjustments in compensation, fringe benefits and other terms and conditions of employment, including layoffs. I also understand that no agent or representative of the Company has any authority to make any agreement contrary to the foregoing, except by a written employment contract signed by me and the President of the Company or designate.

**Arbitration.** I further recognize that if employed by the Company, I agree, in partial consideration of my employment, to file a demand for arbitration to resolve any disputes arising from my employment. I agree to file such demand within six (6) months after the claim arises or within the applicable statutory limitation period(s) provided by law, whichever occurs first. ANY DISPUTE ARISING OUT OF OR IN CONNECTION WITH ANY ASPECT OF MY EMPLOYMENT OR ANY TERMINATION THEREOF (INCLUDING BY WAY OF EXAMPLE BUT NOT LIMITATION, DISPUTES CONCERNING ALLEGED CIVIL RIGHTS VIOLATIONS, EMPLOYMENT DISCRIMINATION OF ANY KIND INCLUDING ON THE BASIS OF ANY PROTECTED CATEGORY UNDER FEDERAL OR STATE LAW, RETALIATION, WRONGFUL DISCHARGE, ENTITLEMENT TO OVERTIME PAY, SEXUAL HARASSMENT, BREACH OF EXPRESSED OR IMPLIED CONTRACT OR TORT), SHALL BE EXCLUSIVELY SUBJECT TO BINDING ARBITRATION UNDER THE NATIONAL RULES FOR THE RESOLUTION OF EMPLOYMENT DISPUTE OF THE AMERICAN ARBITRATION ASSOCIATION ("AAA"), provided all substantive rights and remedies including any applicable damages provided under pertinent statute(s) related to such claims, the right to representation by counsel, a neutral arbitrator, a reasonable opportunity for discovery, a fair arbitral hearing, a written arbitral award containing findings of facts and conclusions of law, and any other provisions required by law, shall be available in the AAA forum. Any decision of the Arbitrator shall be final and binding as to both parties, and enforceable by any court of competent jurisdiction. Nothing contained herein shall prohibit me from filing any claims or charges with any appropriate government agency. I UNDERSTAND THAT MY AGREEMENT HEREIN CONSTITUTES A WAIVER OF MY RIGHT TO ADJUDICATE CLAIMS AGAINST THE COMPANY IN COURT AND A WAIVER OF A JURY TRIAL, AND THAT I AM AGREEING INSTEAD TO ARBITRATE ANY SUCH CLAIMS.

|                  |             |
|------------------|-------------|
| <b>SIGNATURE</b> | <b>DATE</b> |
|------------------|-------------|