GENERAL DIE CASTERS, INC. Equal Employment Opportunity Data Sheet

General Die Casters is an Equal Employment Opportunity employer. It is the philosophy, intent and commitment of General Die Casters. to adhere to a policy of equal employment opportunities for all applicants and employees without regard to race, color, religion, sex, age, national origin, veteran status or mental or physical disability or any other status protected by law.

To help us comply with federal/state equal opportunity record keeping, reporting, and other legal requirements, please answer all questions as they apply below. This data is used only for periodic government reporting and will be kept in a confidential file separate from employment applications and individual personnel records.

Last		First N	MI	Socia	Social Security Number Date				
				Sex:	Μ	F	Birth Date _	//	
Position S	Sought								
Yes	No		· ·			· .	persons of Cuban, M ure or origin regardl	lexican, Puerto Rican less of race.)	
		Check one of th	e following (Race/Et	thnic	Grou	(p):		
	White (Not I Africa or the Black or Afr groups of Af Asian (Not I Southeast As Malaysia, Pa Native Hawa peoples of H American In	Hispanic or Latin Middle East) <i>ican American</i> (N rica) Hispanic or Latin ia, or the Indian S kistan, the Philipp <i>iian or Pacific Is</i> awaii, Guam, Sam <i>dian or Alaskan H</i> orth and South Ar	 (All person 	ns havin or Latin includin 'hailand, Hispanic Pacific Is Iispanic	g orig no) (A g orig g, for , and c or l sland c or I	gins in All per gins in r exam Vietna L atino s.). Latino)	rsons having origins any of the original p pple, Cambodia, Chir am.). (All persons havin (All persons havin	ed below.) peoples of Europe, North in any of the Black racial peoples of the Far East, na, India, Japan, Korea, ng origins in any of the original g origins in any of the original in tribal affiliation or	
	Ch	eck if any of the f	following are a	applicab	le:				
	August 5, 19 <i>Disabled Vet</i> disability rate aggravated in	64 and May 7, 19 eran (A person er ed at 30% or more n the line of duty).	75). ntitled to disate; or a person	oility co discharg	mper ged of	isation r releas	through the Vetera	art of which was between n's Administration for a 7 for a disability incurred or or life activities).	
Refe	erral Source:	Advertiseme	nt				Employee (Nan	ne)	
	School Nam	e of School	[] \	Walk-In] Age	ncy		
	Sig	gnature of Applica	int						

GENERAL DIE CASTERS, INC. IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER. IT IS THE PHILOSOPHY, INTENT, AND COMMITMENT OF GENERAL DIE CASTERS, INC. TO ADHERE TO A POLICY OF EQUAL EMPLOYMENT OPPORTUNITIES FOR ALL APPLICANTS AND EMPLOYEES WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, AGE, NATIONAL ORIGIN, VETERAN STATUS, PREGNANCY, MENTAL OR PHYSICAL DISABILITY OR ANY OTHER STATUS PROTECTED BY LAW.

When completing this application, do not leave any questions blank. Do not substitute "see resume" for any requested information. Complete one application for every job for which you are applying.

THIS APPLICATION WILL REMAIN ACTIVE FOR THREE (3) MONTHS UPON SIGNING.

PERSONAL DATA

Last Name	First		Middle		Date	
Street Address				Home Phone		
City, State, Zip				Business Phone		
Are you 18 years or olde	er?					
Position Desired				Salary Desired		
Are you current	ly on "lay-off" status and subject	to recall?	Are you cu	I irrently employed?		
When would you be able to begin work? Are you available to work: □ Full-Time □ Part-Time □ Shift Work □ Temporary					Temporary	
Are you legally eligible for employment in the United States?			If necessary, are you available to work overtime?			
Have you been convicted of a felony or misdemeanor, whether sealed or unsealed, (other than minor traffic violations) that might substantially relate to the job for which you are applying? NOTE: A conviction will not necessarily be a bar to employment. Factors such as date, nature and number of offenses, age at the time of offense and rehabilitation will be considered.						
Are you related to anyone employed at General Die Casters?			How did you lea	arn of General Die C	Casters?	

EMPLOYMENT HISTORY (List most recent employer first)

Company Name:	Telephone Number:
Address:	Employed (mm/yy) From: To:
Name and Title of Supervisor:	Pay: Start: \$ Finish: \$
Job Title and Job Description:	Reason for Leaving:
Company Name:	Telephone Number:
Address:	Employed (mm/yy) From: To:
Name and Title of Supervisor:	Pay: Start: \$ Finish: \$
Job Title and Job Description:	Reason for Leaving:
Company Name:	Telephone Number:
Address:	Employed (mm/yd) From: To:
Name and Title of Supervisor:	Pay: Start: \$ Finish: \$
Job Title and Job Description:	Reason for Leaving:

Company Name:	Telephone Number:
Address:	Employed (mm/yd) From:
Name and Title of Supervisor:	Pay: Start: \$ Finish: \$
Job Title and Job Description:	Reason for Leaving:
•	

	High School	College/University	Graduate/Professional	
School Name, Address and Phone Number				
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4	
Diploma/Degree				
Course of Study				
Honors Received				

Degree of educational achievement is considered in the hiring process only to the extent that specific educational achievement is a requirement for performing the job.

SPECIAL SKILLS AND TRAINING

Other than English, are you fluent in any language? Please List:

In which computer programs do you feel you have proficiency?

Do you have any other advanced training, continuing education or special study experience that you think would be helpful in the position for which you are applying? Please list:

REFERENCES

Name	Relationship	Years Known	Telephone Number		
May we contact your current employer?					

APPLICANT'S AGREEMENT

In consideration of the review of my application:

I understand and agree that, if I am employed by the Company, my employment and compensation is entirely "at will," which means neither are guaranteed for any definite period of time, and either can be modified or terminated, with or without cause, and regardless of the date of payment of my wages and salary, and with or without prior notice at any time, at the option of either the Company or myself. I understand and agree that the Company reserves the right to establish and/or change any of the terms or conditions of any aspect of my employment at its discretion at anytime with or without notice. I understand and agree that no other individual oral or written agreements of any kind pertaining to the terms of my employment and/or my compensation exist outside of this Agreement between the Company and myself, and if I believe that any type of previous agreements between any Company representative and myself have been made, I agree they are **superseded by the contents of this Agreement**. I understand and agree that no representative of the Company, other than the President, has any authority to enter into any other agreement or with me personally or provide me with any assurances relating to any aspect of my employment with the Company, except that the above-mentioned officials of the Company may do so in writing.

I authorize the Company to investigate my background, qualifications and/or any other information on me as it deems appropriate. I also authorize anyone the Company contacts as part of its investigation to release any information they have regarding me or my employment to the Company or its representatives. Further, I authorize the Company to release the results of any background checks conducted on me and any other information related to me or my employment as it deems appropriate. I also agree to release all parties, including the Company and its representatives, from all liability for any damage that may result from either releasing or furnishing any such information. I agree that if I breach or threaten to breach this Agreement, I will indemnify all parties from any loss or expenses incurred by my breach, including, but not limited to, all of their attorney's fees and administrative costs deemed necessary and reasonable by the other party.

I further agree to take any lawful medical examination, chemical, drug or alcohol test upon request by the Company at its sole discretion as a condition of my employment, or, if I am hired, as a condition of my continued employment at any time as deemed appropriate by the Company. I agree that my refusal to take any such examinations or tests immediately upon request may be cause for my not being hired or, if I am hired, may be cause for the immediate termination of my employment. Further, I authorize the Company to release the results of these tests to whomever it deems appropriate where allowed by law. I hereby release all parties from all liability for any damage that may result from conducting, releasing or furnishing information regarding these examinations or tests.

I also certify that the facts contained in this application are true and complete to the best of my knowledge and understand that if I am employed, any statements I have falsified on this Application shall be grounds for dismissal. I further certify that I have read all of the foregoing, understand the same and do hereby voluntarily agree to all of the provisions contained herein."

READ CAREFULLY BEFORE SIGNING

In consideration of the review of my application, I agree that any claim or lawsuit relating to my employment with the Company must be filed no more than 180 days after the date of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary."

If you are hired, this employment application will become part of your official employment record.