

We appreciate your interest in applying for employment with Insul Techs. We believe every individual should be treated fairly, equitably and with dignity. All qualified applicants will receive consideration for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, protected veteran status, ancestry, marital status, pregnancy, medical condition, gender identity, or status as a disabled individual. Please note that passing a pre-employment drug screening is a condition of employment with the Company and that you MUST sign and initial each page of this Application to be considered for Employment.

Application for Employment			
P e r s o n a l I n f o r m a t i o n	Name		Date of birth
	Present Address		Previous Address
	City, State, Zip Code		City, State, Zip Code
	SSN		Home Phone Number ( )
	U.S Citizen	[ ] Yes [ ] No	Alternate Phone Number ( )
E-mail Address			

Employment Preference			
O b j e c t i v e s	Position Desired		Earnings Desired
	Location Desired		Are you available to travel? [ ] Yes [ ] No Are you willing to relocate? [ ] Yes [ ] No
	Date Available to Work		

E d u c a t i o n, T r a i n g a n d S p e c i a l S k i l l s	Type of School	Name and Location	Did you graduate?	Major/Minor
	High School		[ ] Yes [ ] No	
	GED or HS Equivalency		[ ] Yes [ ] No	
	College or University		[ ] Yes [ ] No	
	Graduate School		[ ] Yes [ ] No	
Trade School or Junior College		[ ] Yes [ ] No		

	Other		[ ] Yes [ ] No	
	Professional License or Certification			
	Software, Equipment, Seminars or Classes			

<b>Mil itar y Ser vic e</b>	<b>Dates of Service:</b>	<b>Branch/Unit:</b>
	<b>Starting Rank:</b>	<b>Rank at Discharge:</b>
	<b>Active</b> <b>Reserve</b>	
	<b>Summarize any training or special skills acquired which would be related to the position applied for:</b>	
<b>Citations and Awards:</b>		

<b>Em pl oy m en t His tor y</b>	<b>List employment history, starting with most recent employment.</b>			
	Employer		Phone Number	( )
	Address (including city, state and zip code)		Fax Number	( )
			Start Date (month/year)	
	Title or Position		End Date (month/year)	
	Supervisor Name and Phone Number		Starting Salary	
			Ending Salary	
	May we contact this employer?	[ ] Yes [ ] No	Last Bonus or Incentive	
	<b>Duties and Responsibilities:</b>			
	Reason for Leaving			
	<b>List employment history, starting with most recent employment.</b>			
	Employer		Phone Number	( )
	Address (including city, state and zip code)		Fax Number	( )
			Start Date (month/year)	
Title or Position		End Date (month/year)		
Supervisor Name and Phone Number		Starting Salary		
		Ending Salary		
May we contact this employer?	[ ] Yes [ ] No	Last Bonus or Incentive		

Em pl oy m en t H is t o r y	Duties and Responsibilities:			
	Reason for Leaving			
	Employer		Phone Number	( )
	Address (including city, state and zip code)		Fax Number	( )
			Start Date (month/year)	
	Title or Position		End Date (month/year)	
	Supervisor Name and Phone Number		Starting Salary	
			Ending Salary	
	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Last Bonus or Incentive	
	Duties and Responsibilities:			
	Reason for Leaving			

<b>REFERENCES:</b> Please list professional references; do not include family members or people who live with you. Please list three professional references.				
Name	Address	Phone Number	Occupation	Years Acquainted

Can you submit verification of either your citizenship or your legal right to work in the United States?	[ ] Yes [ ] No
Are you 18 years of age or older and can you submit verification if requested?	[ ] Yes [ ] No
Are you seeking Full-time or Part-time work?	[ ] FT [ ] PT
Are you able to work overtime?	[ ] Yes [ ] No
Have you ever worked for any Insul Techs, Inc. company? If yes, when/where?	[ ] Yes [ ] No
Are any relatives currently employed with any Insul Techs? If yes, give full name:	[ ] Yes [ ] No
Are you able to perform the essential functions of the job you are applying for with or without reasonable accommodation, if needed?	[ ] Yes [ ] No
May we contact your present employer? If no, please explain	[ ] Yes [ ] No

Please explain fully any gaps in your employment history and/or periods of time when you were not employed. Please provide dates and details:

Have you ever been terminated or asked to resign from any job?  
If yes, please explain

**INSTRUCTIONS – PLEASE READ BEFORE YOU RESPOND**

**No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.**

**California:** Applicants should not disclose (or answer “Yes” for) (1) any conviction specified in California Labor Code section 432.8 (which pertains to certain marijuana offenses that are more than two years old), (2) any conviction that resulted in a referral to and participation in any pretrial or post-trial diversion program pursuant to California Labor Code section 432.7, or (3) any misdemeanor convictions for which probation has been completed or otherwise discharged and the case has been dismissed by a court.

**Question:** Have you been convicted of any crime in the past 7 years? The term crimes includes moving violations (such as “driving without a license”, “speeding” or “DUI/OWI”).

Regardless of location, do not include convictions that were sealed, expunged, erased or pardoned pursuant to a court order. A conviction includes any plea (e.g., nolo contendere/no contest), verdict or other finding of guilt regardless of whether sentence is imposed by the court.

YES  NO

**If you answered “yes,” please list the date of conviction and offense(s), subject to any applicable limitations above.**

(\*NOTE: Answering “yes” to this question and providing conviction date and offense(s) does not constitute an automatic bar to employment and will be considered only if it relates to the requirements of the job applied for and only to the extent such information can be considered consistent with applicable law. Factors such as date of offense, seriousness and nature of the violation will be taken into account.)

How did you hear about the position and the company?  
Advertisement? If so, where?  
Recruiter? If so, who?  
Current Insul Techs Employee? If so, who?

**Important – Please read carefully and sign.**

I certify that the information contained in this application is true and complete to the best of my knowledge. Any misrepresentation or omissions of any fact in this Application or that I have otherwise provided during the application and hiring process can be justification for the Company's refusal of employment or, if employed, grounds for my termination.

I understand that the Company will investigate thoroughly my entire work and personal history and may verify all data I have provided in this Application, related papers, or oral interview. I specifically authorize any of the persons or organizations referenced in this Application to give the Company any and all relevant information they may have, personal or otherwise, with regard to any subjects not covered by this Application and release all such parties from liability for any damage that may result from furnishing such information to the Company. I understand that this inquiry includes information as to my character, general reputation and personal characteristics. I authorize the Company to request and receive such information.

**If I am offered employment, with such an offer conditioned upon the successful completion of a drug screen and/or physical examination, I agree to undergo said drug screen and/or physical examination to determine if I meet the standards required of the position applied for. In addition, I expressly authorize any physician, hospital or other institution to release any medical records of information with respect to my physical status, either concurrent with or subsequent to my employment with the Company, in the event such medical records or information are related to any claim made against the Company. I understand that should I decline to sign this consent or decline to take any of the above tests, the Company may reject my Application or terminate my employment.**

I understand that if hired, the Company is an employer at-will and my employment may be terminated with or without cause or notice, at any time, at the option of either the Company or myself. This at-will employment relationship can only be changed by a written contract signed by a designated representative of the Company. I further understand that if an offer of employment is made; such an offer may be withdrawn, with or without prior notice, at any time, at the option of either the Company or me. In addition, if I am employed, I understand that the Company can change wages, benefits, rules, regulations and the conditions of my employment at any time without prior notice to me.

If hired, I agree to comply with all rules, policies, procedures and regulations of the Company.

I acknowledge that I have been advised that this Application will remain active for no more than 90 days from the date it was submitted.

**Signature**

**Date**