

SALT LAKE CABLE & HARNESS INC.

APPLICATION FOR EMPLOYMENT

USE TYPEWRITER OR PRINT CLEARLY

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job-related medical condition or handicap. ✓

Name _____
Last First Middle

Address _____

City State Zip

Home Phone Work Phone Social Security Number

TYPE OF WORK DESIRED _____

TYPES OF EMPLOYMENT ACCEPTABLE FULL-TIME ___ PART-TIME ___ TEMPORARY ___

DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? YES ___ NO ___ IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? YES ___ NO ___

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? YES ___ NO ___ IF SO, WHEN? _____

EDUCATION

HIGH SCHOOL GRADUATE? YES ___ NO ___ LIST HIGHEST YEAR OF SCHOOLING COMPLETED _____

LIST VOCATIONAL SUBJECTS THAT ARE IMPORTANT TO THIS APPLICATION OR MAY HELP YOU IN THE JOB FOR WHICH YOU ARE APPLYING AND STATE THE LENGTH OF STUDY

College, Business, or Trade Schools Name and City Location	Major or Vocational Subjects	Length of Time	Date Completed	Degree
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Subjects of Special Study or Research Work:

EXPERIENCE

Beginning with present or most recent, list your last three employers. If you wish to add more information, a supplement sheet or resume may be attached. Include military service, if any.

EMPLOYER'S NAME _____ DATES From: _____ To: _____
ADDRESS _____ HOURS WORKED PER WEEK _____
JOB TITLE AND DUTIES, OFFICE EQUIPMENT OPERATED _____

IMMEDIATE SUPERVISOR _____

REASON FOR LEAVING _____

START SALARY _____ LEFT SALARY _____

EMPLOYER'S NAME _____ DATES From: _____ To: _____

ADDRESS _____ HOURS WORKED PER WEEK _____

JOB TITLE AND DUTIES, OFFICE EQUIPMENT OPERATED _____

IMMEDIATE SUPERVISOR _____

REASON FOR LEAVING _____

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IMMEDIATE SUPERVISOR _____

REASON FOR LEAVING _____

START SALARY _____ LEFT SALARY _____

GENERAL

Please respond fully and completely to the following questions:

YES NO

- Are you at least eighteen (18) years of age?
- Have you ever been convicted of a felony? (A criminal record does not automatically bar employment.) If so, please explain in detail:

- Can you, after employment, submit verification of your legal right to work in the United States?
- Do you currently use any drugs or substances illegal under federal or state law? If so, please explain in detail:

REFERENCES

List three persons who are not related to you and who are willing to give references. (You must have known the person for at least one year.)

Name	Address/Telephone Number	Business	Years Acquainted
1.			
2.			
3.			



CERTIFICATION OF APPLICANT (READ CAREFULLY BEFORE SIGNING)

All of the information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may be cause for rejection of my employment application or, if employed, may result in my termination. I understand that the information in this application may be used, and my previous employers may be contacted, to investigate my work history. I hereby authorize any former employer, school, or reference listed herein to answer any and all questions and agree to hold all persons, schools, or employers harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and is not a contract to employ me. Furthermore, I expressly understand that, in the event of my employment with the Company, my employment shall be completely voluntary, for an indefinite term, and at-will and may be terminated by myself or by the Company at any time for any or no reason and with or without notice. I further understand that, in the event of my employment with the Company, my status as an employee-at-will may not be changed or modified (1) by any practice or procedure of the Company or in the industry or (2) by any policy manual or other document issued by the Company except by a written employment contract executed by the President and Secretary of the Company and myself that pertains solely to my employment and that specifically revokes the employment-at-will relationship. If employed, I agree to comply with all reasonable rules of the Company as a condition of continued employment. In the event the Company advances me money or other things of value or I otherwise become indebted financially to the Company, I agree to repay the Company and also agree that any wages due me upon termination may be offset by payroll deduction against any such monies due the Company.

Date: _____ Signature of applicant _____

DO NOT WRITE BELOW THIS LINE

Interviewed By _____ Date _____

REMARKS: _____

Neatness _____ Ability _____

Hired _____ Position _____ Salary _____
 Wages _____

Approved: 1. _____ 2. _____ 3. _____
 Employment Manager Department Head General Manager

SALT LAKE CABLE & HARNESS INC.

STATEMENT OF AT-WILL EMPLOYMENT

Salt Lake Cable & Harness Inc. (the "Company") is an "at-will" employer. By accepting or continuing employment with the Company, each employee acknowledges that he or she is an at-will employee. This means that each employee's employment with the Company is completely voluntary, for an indefinite term, at-will and may be terminated by the employee or by the Company at any time for any or no reason, with or without notice. No employee's status as an employee-at-will of the Company may be changed or modified (1) by any practice or procedure of the Company or in the industry or (2) by any policy manual or other document issued by the Company except by a written employment contract executed by the President of the Company and by the individual employee that pertains solely to the employee's employment and that specifically revokes the employment-at-will relationship. No manager, supervisor, or other employee of the Company has the power or authority, either verbally or in writing, to modify the terms and conditions of the employment-at-will relationship except by a written employment contract executed by the President of the Company and by the individual employee that relates solely to the employee's employment and that specifically revokes the employment-at-will relationship.

I hereby acknowledge that I have read the foregoing Statement of At-Will Employment and that I understand and agree to the terms and conditions set forth therein.

DATED: _____

Employee's Signature

Please Print Name & Address:

