



# Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status. This policy is modified with respect to citizenship and national origin because of compliance with US Export Regulations (EAR / ITAR). We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Date \_\_\_\_\_

Last name \_\_\_\_\_ First name \_\_\_\_\_ Middle name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone \_\_\_\_\_

Email Address \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.)  Yes  No

Are you looking for full-time employment?  Yes  No

If no, what hours are you available? \_\_\_\_\_

Are you willing to work nights?  Yes  No

Are you willing to work weekends?  Yes  No

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes  No

If yes, please describe conditions. \_\_\_\_\_

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## Employment Desired

Position applied for \_\_\_\_\_

Desired starting salary \_\_\_\_\_

How did you hear of this opening? \_\_\_\_\_

Have you ever applied for employment here?  Yes  No

When? \_\_\_\_\_

Where? \_\_\_\_\_

Are you presently employed?  Yes  No

May we contact your present employer?  Yes  No

Will you relocate?  Yes  No

Are you willing to travel?  Yes  No If yes, what percent? \_\_\_\_\_

Do you have a driver's license?

What is your means of transportation to work?

Date you can start \_\_\_\_\_

Please list applicable skills \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Education**

|                | School Name and Location | Year  | Major | Degree |
|----------------|--------------------------|-------|-------|--------|
| High School    | _____                    | _____ | _____ | _____  |
| College        | _____                    | _____ | _____ | _____  |
| College        | _____                    | _____ | _____ | _____  |
| Post-College   | _____                    | _____ | _____ | _____  |
| Other Training | _____                    | _____ | _____ | _____  |

In addition to your work history, are there are other skills, qualifications, or experience that we should consider?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Rate your skills with the following software 1 to 5[1 poor/none to 5 expert]:

Word \_\_\_\_ CAD/CAM \_\_\_\_

Excel \_\_\_\_ MRP\_\_\_\_ Which system? \_\_\_\_\_

Please list any scholastic honors received and offices held in school.

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Are you planning to continue your studies?  Yes  No

If yes, where and what courses of study?

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**Employment History (Start with most recent employer)**

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

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Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

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Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_

Company Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Date Started \_\_\_\_\_ Starting Wage \_\_\_\_\_ Starting Position \_\_\_\_\_

Date Ended \_\_\_\_\_ Ending Wage \_\_\_\_\_ Ending Position \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

May we contact?  Yes  No

Responsibilities \_\_\_\_\_

Reason for leaving \_\_\_\_\_

**References**

List three personal references, not related to you, who have known you for more than one year.

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_

**Emergency Contact**

In case of emergency, please notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

In exchange for the consideration of my job application by OptiPro Systems, LLC (hereinafter called "the Company"), I agree that: Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of , or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by an officer of the Company. Both the undersigned and employer may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts requested in this application is cause for dismissal at any time without any previous notice.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment. I have received from the company a list of the approved documents that are required.

I understand that, in connection with the routine processing of my employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## INVITATION TO SELF-IDENTIFY

Name: \_\_\_\_\_

How did you learn about OPTIPRO SYSTEMS LLC? \_\_\_\_\_

PLEASE READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING THIS FORM

COMPANY NAME is an Equal Opportunity Employer committed to the policies and principles of Non-Discrimination and Affirmative Action. To implement these policies and to respond to federal affirmative action recordkeeping and reporting requirements, it is important that the following information be gathered from all applicants and employees. Providing this information is optional. Failure to submit data will not in any way affect your present or future employment. The information provided will remain confidential and be used primarily for government reporting purposes.

**RACE/ETHNIC GROUPS:** Are you Hispanic or Latino? Yes  No

**If you answered “No” to the question “Are you Hispanic or Latino?” please check the applicable race box (check one):**

- White (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- American Indian or Alaska Native (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- Two or More Races – All persons who identify with more than one of the above five races. (Not Hispanic or Latino)

**SEX:**

Male  Female

**VETERAN STATUS:**

Classifications of *protected veteran* are defined as follows:

- A “**disabled veteran**” is either a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or a person who was discharged or released from active duty because of a service-connected disability.
- A “**recently separated veteran**” means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An “**active duty wartime or campaign badge veteran**” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An “**armed forces service medal veteran**” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

I identify as one or more of the classifications of *protected veteran* listed above.

I am **not** a *protected veteran*.

**APPENDIX: CAMPAIGNS AND EXPEDITIONS THAT QUALIFY FOR VETERANS PREFERENCE**

**Armed Forces Expeditionary Medal:**

| Campaign/Expedition                                       | Start Date | End Date |
|---|------------|----------|
| Afghanistan (Operation Enduring Freedom)                  | 09/11/01   | present  |
| Afghanistan (Operation Iraqi Freedom)                     | 03/19/03   | present  |
| Berlin  | 08/14/61   | 06/01/63 |
| Bosnia (Operation Joint Endeavor)                         | 11/20/95   | 12/20/96 |
| Bosnia (Operation Joint Guard)                            | 12/20/96   | 06/20/98 |
| Bosnia (Operation Joint Forge)                            | 06/21/98   | present  |
| Cambodia  | 03/29/73   | 08/15/73 |
| Cambodia Evacuation (Operation Eagle Pull)                | 04/11/75   | 04/13/75 |
| Congo   | 07/14/60   | 09/01/62 |
| Congo   | 11/23/64   | 11/27/64 |
| Cuba  | 10/24/62   | 06/01/63 |
| Dominican Republic  | 04/28/65   | 09/21/66 |
| El Salvador   | 01/01/81   | 02/01/92 |
| Global War on Terrorism                                   | 09/11/01   | present  |
| Grenada (Operation Urgent Fury)                           | 10/23/83   | 11/21/83 |
| Haiti (Operation Uphold Democracy)                        | 09/16/94   | 03/31/95 |
| Iraq (Operation Northern Watch)                           | 01/01/97   | present  |
| Iraq (Operation Desert Spring)                            | 12/31/98   | 12/31/02 |
| Iraq (Operation Enduring Freedom)                         | 09/11/01   | present  |
| Iraq (Operation Iraqi Freedom)                            | 03/19/03   | present  |
| Korea   | 10/01/66   | 06/30/74 |
| Kosovo  | 03/24/99   | present  |
| Laos  | 04/19/61   | 10/07/62 |
| Lebanon   | 07/01/58   | 11/01/58 |
| Lebanon   | 06/01/83   | 12/01/87 |
| Mayaguez Operation  | 05/15/75   | 05/15/75 |
| Operations in the Libyan Area (Operation Eldorado Canyon) | 04/12/86   | 04/17/86 |
| Panama (Operation Just Cause)                             | 12/20/89   | 01/31/90 |
| Persian Gulf Operation (Operation Earnest Will)           | 07/24/87   | 08/01/90 |
| Persian Gulf Operation (Operation Southern Watch)         | 12/01/95   | present  |
| Persian Gulf Operation (Operation Vigilant Sentinel)      | 12/01/95   | 02/01/97 |
| Persian Gulf Operation (Operation Desert Thunder)         | 11/11/98   | 12/22/98 |
| Persian Gulf Operation (Operation Desert Fox)             | 12/16/98   | 12/22/98 |
| Persian Gulf Intercept Operation                          | 12/01/95   | present  |
| Quemoy and Matsu Islands                                  | 08/23/58   | 06/01/63 |
| Somalia (Operations Restore Hope and United Shield)       | 12/05/92   | 03/31/95 |
| Taiwan Straits  | 08/23/58   | 01/01/59 |
| Thailand  | 05/16/62   | 08/10/62 |
| Vietnam Evacuation (Operation Frequent Wind)              | 04/29/75   | 04/30/75 |
| Vietnam (including Thailand)                              | 07/01/58   | 07/03/65 |

**Navy Expeditionary Medal and Marine Corps Medal for These Operations:**

| Campaign/Expedition               | Start Date | End Date |
|-----------------------------------|------------|----------|
| Cuba                              | 01/03/61   | 10/23/62 |
| Indian Ocean/Iran                 | 11/21/79   | 10/20/81 |
| Iranian/Yemen/Indian Ocean        | 12/08/78   | 06/06/79 |
| Lebanon                           | 08/20/82   | 05/31/83 |
| Liberia (Operation Sharp Edge)    | 08/05/90   | 02/21/91 |
| Libyan Area                       | 01/20/86   | 06/27/86 |
| Panama                            | 04/01/80   | 12/19/86 |
| Panama                            | 02/01/90   | 06/13/90 |
| Persian Gulf                      | 02/01/87   | 07/23/87 |
| Rwanda (Operation Distant Runner) | 04/07/94   | 04/18/94 |
| Thailand                          | 05/16/62   | 08/10/62 |

**Other Campaign and Service Medals Qualifying for Preference:**

| Campaign/Expedition  | Start Date | End Date |
|--|------------|----------|
| Army Occupation of Austria   | 05/09/45   | 07/27/55 |
| Army Occupation of Berlin  | 05/09/45   | 10/02/90 |
| Army Occupation of Germany (exclusive of Berlin)                         | 05/09/45   | 05/05/55 |
| Army Occupation of Japan   | 09/03/45   | 04/27/52 |
| Chinese Service Medal (Extended)   | 09/02/45   | 04/01/57 |
| Korea Defense Service Medal  | 07/28/54   | TBD      |
| Korean Service   | 06/27/50   | 07/27/54 |
| Kosovo Campaign Medal (KCM) Operation Allied Force                       | 03/24/99   | 06/10/99 |
| Kosovo Campaign Medal (KCM) Operation Joint Guardian                     | 06/11/99   | TBD      |
| Kosovo Campaign Medal (KCM) Operation Allied Harbor                      | 04/04/99   | 09/01/99 |
| Kosovo Campaign Medal (KCM) Operation Sustain Hope/Shining Hope          | 04/04/99   | 07/10/99 |
| Kosovo Campaign Medal (KCM) Operation Noble Anvil                        | 03/24/99   | 07/20/99 |
| Kosovo Campaign Medal (KCM) Task Force Hawk                              | 04/05/99   | 06/24/99 |
| Kosovo Campaign Medal (KCM) Task Force Saber                             | 03/31/99   | 07/08/99 |
| Kosovo Campaign Medal (KCM) Task Force Falcon                            | 06/11/99   | TBD      |
| Kosovo Campaign Medal (KCM) Task Force Hunter                            | 04/01/99   | 11/01/99 |
| Navy Occupation of Austria   | 05/08/45   | 10/25/54 |
| Navy Occupation of Trieste   | 05/08/45   | 10/25/54 |
| Southwest Asia Service Medal (Operations Desert Shield and Desert Storm) | 08/02/90   | 11/30/95 |
| Units of the Sixth Fleet (Navy)  | 05/09/45   | 10/25/55 |
| Vietnam Service Medal (VSM)  | 07/04/65   | 03/28/73 |
| Rwanda (Operation Distant Runner)  | 04/07/94   | 04/18/94 |
| Thailand   | 05/16/62   | 08/10/62 |



### Voluntary Self-Identification of Disability

Form CC-305  
OMB Control Number 1250-0005  
Expires 1/31/2017  
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#### Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.i To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

#### How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Today's Date

**Voluntary Self-Identification of Disability**

Form CC-305  
OMB Control Number 1250-0005  
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**Reasonable Accommodation Notice**

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

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i Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at [www.dol.gov/ofccp](http://www.dol.gov/ofccp).

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.