EMPLOYMENT APPLICATION

Nutter Corp. (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability. DATE



Last Name	First		M.I				
Other Name(s) Used		_ Are you at least 18 yea	urs old? Yes No				
Address	City	State	Zip				
Home Phone () Work/Message Phone	()	Social Security #					
Position Applied For	_ Referred By	red BySalary Desired					
EMPLOYMENT HISTORY							
List your last three applicable employments, starting with the most rec	ent. You may attach a resume.						
1. Employer Name	Address						
Supervisor Name	Supervis	or Phone ()					
Start Date/ End Date/	_/ Starting Wage \$	Endi	ing Wage \$				
Job Title Duties & Responsibilities		Reason for Leaving					
2. Employer Name	Address						
Supervisor Name	Supervis	or Phone ()					
Start Date/ End Date/	_/ Starting Wage \$	Endi	ing Wage \$				
Job Title Duties & Responsibilities		Reason for Leaving					
3. Employer Name	Address						
Supervisor Name	Supervis	or Phone ()					
Start Date/ End Date/	_/ Starting Wage \$	Endi	ing Wage \$				
Job Title Duties & Responsibilities		Reason for Leaving					
EDUCATION							
Circle highest grade completed: High School 9 10 11 12 Colle	ge, Trade or Business 1 2 3	3 4 Graduate Studies _					

List any Professional Designations (First Aid, CPR, CDL, Flagger Certification, Traffic Control Supervisor, Confined Space Classes, Trenching & Shoring Classes, etc.)

Other Special Knowledge, Skills or Qualifications _____

GENERAL

DEDGONIAI

May we	conta	ct you	r current employer f	or references? YES NO	lf hired, will you b	e able to work ove	ertime? `	YES	NO	If hired, are you willing to
travel?	YES	NO	If YES, how far? _	How long?_		Will you be able	to perfo	orm t	he es	sential job functions of the
position	for w	hich y	ou are applying with	n or without reasonable acc	commodations? Y	ES NO				

CERTIFICATION & AUTHORIZATION

The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to disciplinary action up and to and including dismissal, if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery. I authorize the Company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize the Company to obtain any credit and consumer check. I understand that nothing in this employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing. If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration and Reform and Control Act (IRCA) of 1986. The document(s) provide will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements. X_____

Date

PRE-EMPLOYMENT DRUG TESTING REQUIRED