

Application for Employment V&P Hydraulic Products, LLC

1700 Pittsburgh Drive, Delaware, OH 43015-0369, 740-203-3600

AN EQUAL OPPORTUNITY EMPLOYER

An applicant that needs a reasonable accommodation to the application and / or interview process should notify V&P's Human Resources Department.

Position(s) applied for _____ Date of application _____

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # () _____ Alternate Telephone # () _____ E-mail Address _____

How did you hear about us? _____

If you are under 18, can you furnish a work permit if required? Yes No

If no, please explain: _____

Have you previously been employed with V&P? Yes No If yes, give dates and positions: _____

Are you currently legally eligible under United States law to be employed by V&P Hydraulic Products? Yes No

Date available for work ____/____/____ What is your desired salary range? \$ _____

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a crime besides a traffic offense with a penalty less than \$300? Yes No If yes, please provide date(s) and details: _____

Work Experience - List previous employment experience beginning with the most recent or present employer.

Employer	Telephone #	Address	City	State	Zip Code
Starting job title / final job title			Last Supervisor Title		May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employment Dates: to		Compensation (Starting) \$ per	Compensation (Final) \$ per		
Why did you leave?					
Please summarize the type of work performed and job responsibilities:					
Employer	Telephone #	Address	City	State	Zip Code
Starting job title / final job title			Last Supervisor Title		May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employment Dates: to		Compensation (Starting) \$ per	Compensation (Final) \$ per		
Why did you leave?					
Please summarize the type of work performed and job responsibilities:					
Employer	Telephone #	Address	City	State	Zip Code
Starting job title / final job title			Last Supervisor Title		May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employment Dates: to		Compensation (Starting) \$ per	Compensation (Final) \$ per		
Why did you leave?					
Please summarize the type of work performed and job responsibilities:					

Educational Background - List your educational background beginning with the most recent or present educational institution.

Institution (include City & State)	Years Completed	Completed	GPA / Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____ <input type="checkbox"/> Other _____		

Skills / Training - Summarize any special training, skills, licenses and / or certificates that may assist you in performing the position for which you are applying: _____

Computer Skills - Check appropriate boxes and include software titles and years of experience.

- Word Processing _____ Years: _____ E-mail _____ Years: _____
 Spreadsheet _____ Years: _____ Internet _____ Years: _____
 Presentation _____ Years: _____ Other _____ Years: _____

References - List three work references, not related to you, who are not supervisors listed in the work experience section of this application. If not applicable, list three school or personal references that are not related to you.

Name	Occupation	Relationship	Telephone	Number of Years Known
			()	
			()	
			()	

APPLICANT AUTHORIZATION

I certify that my answers are true, complete, and accurate to the best of my knowledge. I also understand that if I am hired, I will be required to complete an employment eligibility verification form (I-9 Form) to establish my identity and legal authorization to work in the United States of America, in accordance with federal immigration law.

I authorize investigation of all statements contained in this application. I authorize V&P and its representatives to contact and obtain information from any references, employers, educational institutions, and public entities in order to verify the accuracy of any information provided in my application and / or interview(s). I hereby waive any and all rights and / or claims I may have regarding V&P and its representatives, for legally seeking, collecting, and using truthful and non-defamatory information in the employment process, and all other persons and organizations from any and all liability for any damages that may result from the release of such information.

If I am hired, I understand that my employment will be at-will, which means I may be terminated at any time and for any reason, with or without advance notice. I am also free to resign at any time. No supervisor, manager, or representative of V&P has authority to enter into any agreement with me for employment for any specific period of time or to alter my at-will status, except V&P's President, who may do so in writing in a document that is signed by both me and V&P's President. I understand that this employment application and any other company documents are not contracts of employment.

V&P provides equal opportunity in all of its employment practices to all qualified employees and applicants without regard to race, color, religion, gender, national origin, ancestry, age (40 and older), disability, military status or any other category protected by applicable federal, state and local laws.

I understand that this application remains current for only 30 days. After 30 days, if I have not heard from V&P and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I agree not to commence any action or suit relating to my employment with V&P more than 6 months after the occurrence of the facts giving rise to the claim, or more than 6 months after the date of termination of such employment, whichever is earlier, and to waive any longer statute of limitations to the contrary. In the event that the statute of limitations applicable to such a claim is less than 6 months, I agree that the shorter statute of limitations shall apply.

I agree that if an employment offer is extended to me and I accept the offer, I will fully adhere to the policies, rules and regulations of employment of V&P. I understand that any false or misleading information given in my application or interview(s) may result in elimination from further consideration for employment or, in the event I become employed by V&P, immediate termination of employment.

SIGN ONLY AFTER YOU HAVE READ AND UNDERSTOOD THE ABOVE APPLICANT AUTHORIZATION

I agree that I have read, understand, and willingly accept all terms and conditions of this Applicant Authorization.

Signature _____ **Date** _____