

16. Education.	<i>Name and location of school</i>	<i>Years completed</i>	<i>Year graduated</i>	<i>Degrees(s) received Subject Studied</i>
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Trade, business or vocational school	_____	_____	_____	_____
Academic honors or awards received _____				

17. Other qualifications: information about you – personal qualities, goals, skills and abilities that would be helpful in considering you for employment.

18. Driving record. DAKM positions involve driving while on the job.
- A. Do you have a valid, un-expired driver's license? yes no. Expiration date: _____
- B. Will you show us your driver's license or ID card to verify your identity? yes no
- C. Can you drive a vehicle safely? yes no
- D. Has your driver's license ever been revoked or suspended? yes no. If yes, explain:
- _____
- _____
- E. List any restrictions on your driver's license _____
- F. List all traffic violations (other than parking tickets) for which you were convicted during the past five years. Employer may have this information verified by independent sources.

<i>Year</i>	<i>Violation</i>	<i>City/State</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

19. Do you use illegal drugs (such as marijuana, cocaine, heroin, crack, speed, LSD, etc.)? yes no
- Are you willing to be tested for illegal drug use? yes no

20. Criminal history. A criminal history will not bar consideration for employment. Factors such as age at time of conviction, length of time since offense, seriousness of offense and rehabilitation will be considered in any final decision. Failure to disclose this information will result in immediate termination of employment.

Have you been convicted of a crime? ____ yes ____ no

Are you on probation or parole for any conviction at the present time? ____ yes ____ no

If yes, list all misdemeanors and felonies (other than traffic tickets) for which you have been convicted, including DWIs. You may be asked to obtain verification of any criminal record.

<i>Year</i>	<i>Location (city and state)</i>	<i>Type of crime (theft, assault, etc.)</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

21. Personal references. (Do not include relatives, roommates, or previous employers.)

<i>Name</i>	<i>City/State</i>	<i>Telephone #</i>	<i>Occupation</i>	<i>Years Known</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

22. Have you ever been fired, terminated, or asked to resign by an employer? ____ yes ____ no. If yes, explain:

23. Current Employment.

A. Currently employed? ____ yes ____ no. If no, explain _____

B. Current employer _____ Phone _____

C. City/State _____ From _____ To _____

D. Salary \$ _____ Supervisor's Name _____

E. Position held and duties _____

F. Reason for leaving _____

G. We normally contact an applicant's current and previous employers for reference purposes.

1. Can we contact your current employer at this time? ____ yes ____ no

2. Can we contact your current employer after a conditional offer of employment is made? ____ yes ____ no

24. Previous Employment (employment for the past 5 years).

1st Previous employer _____ Phone _____

City/State _____ From _____ To _____

Salary \$ _____ Supervisor's Name _____

Position(s) held and duties _____

Reason for leaving _____

2nd Previous employer _____ Phone _____

City/State _____ From _____ To _____

Salary \$ _____ Supervisor's Name _____

Position(s) held and duties _____

Reason for leaving _____

3rd Previous employer _____ Phone _____

City/State _____ From _____ To _____

Salary \$ _____ Supervisor's Name _____

Position(s) held and duties _____

Reason for leaving _____

4th Previous employer _____ Phone _____

City/State _____ From _____ To _____

Salary \$ _____ Supervisor's Name _____

Position(s) held and duties _____

Reason for leaving _____

25. Who should we notify in an emergency? Name _____

Relationship _____ Work phone _____ Home phone _____

Do not sign this form until all questions on the Employment Application have been answered.

APPLICANT'S AUTHORIZATION

I hereby give permission to DAKM Incorporated, its agents and/or third-party contractors to:

obtain verification of any information provided by me in this Employment Application and in any supplemental questionnaire, exhibit, resume, or biographical sheet submitted by Applicant:

obtain information regarding my work habits and skills from my past and present employers, as well as listed or developed references or institutions:

obtain information from law enforcement and other governmental agencies, military authorities, and private companies concerning my conduct, including traffic and criminal violations.

obtain information from educational institutions concerning my educational record, conduct and skills;
and

obtain information concerning my credit history from credit reporting agencies, financial institutions, and other sources.

I understand that I may be asked to sign a separate authorization form prior to any testing for illegal drugs. I understand if I receive a conditional offer of employment I may be asked to sign a separate authorization form prior to any job-related medical examination.

I authorize all institutions, agencies, companies or persons referred to above, to give Employer and/or its agents all information requested. I authorize Employer and agencies or companies of Employers choice to investigate all information on this application. Under the Federal Fair Credit Reporting Act, I understand that I am entitled to know if employment is denied because of information obtained by Employer from a consumer-reporting agency. I understand that I will be so advised and given the name of the reporting agency for more information. I release Employer and all other parties from any claims, liabilities, and damages resulting from obtaining or furnishing information. A copy of this authorization and release shall be as valid as the original.

Date

Social Security Number

Applicant's Signature

Applicant's Printed Name

Street Address

City / State / ZIP

Driver's License Number

State Issuing Driver's License

Do not sign this form until all questions on the Employment Application have been answered.

APPLICANT'S CERTIFICATION

I certify that all information provided in this Employment Application is complete and accurate. All of my work experience, training, and other information requested has been disclosed. I have not withheld any fact or circumstance covered by this application.

I understand that any false, misleading, or incomplete information on this application will result in rejection of my application or will result in termination of my employment whenever discovered.

I understand that I may be asked to take a job-related written test and skill tests (if applicable) for the position for which I am applying.

I agree to furnish additional information as may be requested. I release Employer and all other parties from any claims, liabilities, and damages resulting from obtaining or furnishing such information.

Before or after receiving any offer of employment, Employer may request that I submit to testing for illegal drugs by a firm that is chosen and paid for by the Employer. I understand that the reason for such testing is that Employer endeavors to operate its business in a safe manner for all employees, customers, tenants, visitors, and/or guests. The results of such testing will be communicated to Employer or its agents. I understand that I will not be further considered for employment if I refuse to submit to such job-related medical examination.

If employed, I will sign a federal I-9 form and provide positive proof of my identity and verification of my right to live and work in the United States.

If employed, I agree to abide by Employer's rules, procedures and policies as modified from time to time, including any drug-free workplace policies. I understand that the job being applied for requires reliable attendance and dependable performance during working hours. If employed, I understand that I may be required to work various shifts and schedules. I understand that any employment is subject to change in wages, conditions, benefits and operating policies. I understand that if I am employed, such employment will be for an indefinite period and can be terminated at any time by Employer or myself, without advance notice and without cause.

I understand that this application does not constitute an offer or acceptance of employment or an employment contract.

There ____ are or ____ are not attachments to this application. List attachments below (ex. resume, recommendation letter, etc.).

Certification applies to all information contained in this Employment Application and attachments, if any.

Applicant's signature

Date

Applicant's name printed