J+I+T Companies, Inc. Wiring Harnesses, Cables, PC Boards & Sub-Assemblies

EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

| Name | | | | | | |
|--|---------------------|--|-----------------------------|---------------------|--|--|
| LAST | | FIRST | | MIDDLE INITIAL | | |
| Address | | CITY | | STATE | ZIP CODE | |
| Telephone () | | Message 1 | ſelephone (|) | | |
| Position applied for: | | | | Earnings | s expected \$ | |
| Have you previously ap | plied at a JIT? | NO YES If yes, | When? | | Where? | |
| Who or what prompted | l you to apply at a | TIL ? | | | | |
| JIT Company employ | yee (name) | | | | | |
| Ad (please specify) | | | | | | |
| Other | | | | | | |
| Do you have any relativ | es employed witl | h JIT? 🗌 NO 🗍 I | (ES | | | |
| If yes, Name(s) | | | | | | |
| If hired, would you hav | e a reliable mean | s of transportation to and | d from wor | k? | YES 🗌 NO | |
| Are you at least 18 year | rs old? 🔲 YES [| NO | | | | |
| Are you able to perforn reasonable accommoda | | nctions of the job for whi NO | ch you are | applying, e | ither with or without | |
| | | be performed. | | | | |
| | | • | | | | |
| | | onable accommodation measu o passing a medical examinatio | - | - | or eligible applicants/employees to | |
| (Note: We may refuse to hire safety, or morale, or if doing | | | sult in actual c | or potential p | roblems in supervision, security, | |
| US MILITARY EXPERIEN | CE: | | | | | |
| Military Branch | Years of S | Service | Reserve Status | | | |
| Duties, Experience and | Ranks Held | | | | ······································ | |
| Can you provide your D | D214 YES | NO | | | | |
| EDUCATION: | | | | | | |
| School Name | Location | Major/Specialization | Number Years Attended | Graduate? Yes/No | Degree, Certificate, or Units earned | |
| High School | | | | | | |
| College or University | | | | | | |
| Graduate School | | | | | | |
| | | | | | | |
| Other Schooling | | | | | | |

| oreign language proficiencies: | | | | | | •, |
|--|------------------------------|--|--|---------------|-------------------|-----------|
| ORK EXPERIENCE: (Begin with most render to the space provided at t | South & State of Contraction | and the second state of th | . John and the second a second data a state of the second state of the | mployed and e | xplain any ga | ips in |
| CURRENT/MOST RECENT | | | | | | |
| Are you currently employed? 🔲 Yes | 🗌 No | lf yes, may v | we contact your | current emplo | yer? 🔲 Yes | 🗌 No |
| Address | | | | Telephone | | |
| STREET | СІТҮ | | STATE ZIP | | AREA CODE | NUMBER |
| ind of Business | | | Employed from | Month/Yea | to | Month/Yea |
| upervisor's Name | | | Supervisor's T | itle | | |
| b Title | | | | | | |
| uties: | | | | | | |
| eason for leaving or considering char | nge: | | | | | |
| URRENT/MOST RECENT OMPANY/ORGANIZATION: | | | | | | |
| re you currently employed? 🔲 Yes | 🗌 No | If yes, may v | we contact your | current emplo | yer? 🗌 Yes | No No |
| ddress | | | | Telephone | e () | |
| STREET | CITY | | STATE ZIP | | AREA CODE | NUMBER |
| nd of Business | | | Employed from | Month/Yea | to | Month/Yea |
| ıpervisor's Name | | | Supervisor's T | itle | | |
| bb Title | | | | | ········ | |
| uties: | | | | | | |
| eason for leaving or considering char | nge: | | | ····· | | |
| URRENT/MOST RECENT OMPANY/ORGANIZATION: | | | | | | |
| re you currently employed? 🗌 Yes | 🗌 No | If yes, may | we contact your | current emplo | yer? 🗌 Yes | No |
| ddress | <i>CITY</i> | | STATE ZIP | Telephone | e () AREA CODE | NUMBER |
| ind of Business | | | Employed fro | ~ | to | |
| ind of Business | | | - cinpioyeu iroi | Month/Yea | | Month/Yea |
| upervisor's Name | | | Supervisor's T | itle | | |
| b Title | | | | | | |
| uties: | | | | | | |
| eason for leaving or considering char | | | | | | |

HR-0003, Rev. 03/08/2018

| Name/Title | Company Name | Business Phone () | Home Phone () |
|------------|--------------|------------------------|--------------------|
| Name/Title | Сотралу Name | Business Phone () | Home Phone () |
| Name/Title | Company Name | Business Phone () | Home Phone () |
| Name/Title | Company Name | Business Phone () | Home Phone () |

Include at least two business references that are familiar with your work abilities & performance (Must include contact phone numbers).

Please Read Carefully, Initial Each Paragraph and Sign Below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials _____

Ihereby authorize JIT Companies, Inc. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

Initials _____

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire. Initials

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

I certify that all my statements given on this application are correct and realize that falsification, misrepresentation, or material omission of information of this or any other personnel record may result in the withdrawal of any offer made or in my discharge.

Signature of Applicant

Date