

EMPLOYMENT APPLICATION



An ESCO Technologies Corporation

10350 Vacco St., S. El Monte, CA 91733

VACCO INDUSTRIES, INC. IS AN EQUAL OPPORTUNITY EMPLOYER. APPLICANTS ARE CONSIDERED ON THE BASIS OF SKILLS, EXPERIENCE, AND QUALIFICATIONS WITHOUT REGARD TO RACE, COLOR, RELIGION CREED, SEX, SEXUAL ORIENTATION, AGE, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, PHYSICAL AND MENTAL DISABILITY, VETERAN STATUS, MEDICAL CONDITION, GENETIC INFORMATION OR CHARACTERISTICS, GENDER AND GENDER IDENTITY, OR ANY OTHER LEGALLY PROTECTED STATUS. **PLEASE NOTE**, THE COMPANY PROVIDES GOODS AND SERVICES TO THE US GOVERNMENT UNDER THE INTERNATIONAL TRAFFIC IN ARMS REGULATIONS (ITAR) AND MUST COMPLY WITH THE REQUIREMENT THAT ALL EMPLOYEES BE US CITIZENS OR PERMANENT US RESIDENTS WITH VALID GREEN CARDS. THE COMPANY WILL PROVIDE REASONABLE ACCOMMODATIONS TO ALLOW AN APPLICANT TO PARTICIPATE IN THE HIRING PROCESS, IF REQUESTED. THIS APPLICATION IS CONSIDERED CURRENT FOR 90 DAYS ONLY. AT THE END OF THIS PERIOD, IF YOU ARE STILL INTERESTED IN EMPLOYMENT, IT WILL BE NECESSARY FOR YOU TO REAPPLY BY COMPLETING A NEW APPLICATION.

PERSONAL INFORMATION

Name (Last, first, middle initial)

Date of Application

Address (Street)

(City, State, Zip Code)

Home Telephone Number

Message / Cell Phone Number

POSITION INFORMATION

Position desired

Are you available to work:

Full Time

Part Time

Temporary

Days Available:

Hours Available:

Describe any training or special experience related to the position you are applying for: _____

Were you previously employed by VACCO or any ESCO Technologies company?

Yes

No

If yes, when and where? _____

Names of Friends/Relatives employed by VACCO or any ESCO Technologies company?

How were you referred to us? Please be specific:

In accordance with the Federal Immigration and Reform Act of 1986, if you are employed by our Company, you will be asked to provide documentation that verifies your legal right to work in the United States. If you are unable to provide acceptable documentation, the Company cannot legally employ you. Can you provide such documentation? Yes No Are you a U.S. Citizen? Yes No

If you are hired or transferred into a position that requires the operation of a vehicle, we will require a DMV Investigation.

Do you authorize investigation of your DMV record?

Yes

No

Please initial here: _____

If you are applying for a position that requires the operation of a vehicle.

What is your current Driver's License Number? _____ State: _____

Expiration Date: _____

I understand that the Company may obtain Public Records about me as part of a background investigation and that I may waive my right to receive a copy of such Public Records by checking the box to the right:

Employment is contingent upon passing a pre-employment drug screening for the presence of drugs and/or alcohol and background investigation.

EDUCATION*List educational institutions you have attended:*

	NAME/LOCATION	SUBJECT(S) STUDIED	DEGREES OR CREDITS
High School			
Junior College/Trade School			
University/College			
Other			

WORK HISTORY *List most recent employer first. You may include military service and training.*

Employer: _____ Address (street, city, state, zip code) _____ Telephone Number (include area code) _____

Supervisor's Name and Position: _____ Dates of employment: _____

Type of Business: _____ Position Held: _____

Reason for Leaving: _____ May we contact now?
 Yes No

Responsibilities: _____

Employer: _____ Address (street, city, state, zip code) _____ Telephone Number (include area code) _____

Supervisor's Name and Position: _____ Dates of employment: _____

Type of Business: _____ Position Held: _____

Reason for Leaving: _____ May we contact now?
 Yes No

Responsibilities: _____

Employer: _____ Address (street, city, state, zip code) _____ Telephone Number (include area code) _____

Supervisor's Name and Position: _____ Dates of employment: _____

Type of Business: _____ Position Held: _____

Reason for Leaving: _____ May we contact now?
 Yes No

Responsibilities: _____

REFERENCES *List people who know your work. Do not include personal references*

Name	Professional Relationship	Work Telephone Number	Home/Cell Number

THE FOLLOWING POINTS ARE VERY IMPORTANT. PLEASE READ THEM CAREFULLY BEFORE SIGNING THIS APPLICATION

I authorize investigation of all statements contained in this application. I will not hold VACCO, Inc., or any of my previous employers liable in any respect if an employment offer is not forthcoming, is withdrawn, or if my employment is terminated as a result of misrepresentation or omission of facts on this application. I promise I will not bring any legal claims or actions against my current or former employers due to their responses to any job reference request. I further understand that the completion of an application with the Company is a preliminary step to employment. It does not obligate the Company to offer employment to me, or for me to accept employment. **I understand that all offers of employment are conditional on the completion of a successful background screening.** I understand that if I am employed by VACCO, additional personal data may be required for determination of benefits, statistical purposes, and legal compliance.

I understand that all offers of employment are also conditional on the successful completion of a drug and alcohol screening. This will be performed at a company-designated medical facility and at the company's expense. I further understand that if this screening is not successful, all offers of employment will be withdrawn. I also understand that company policy prohibits the use, sale, or possession of illegal drugs or non-prescribed controlled substances, as well as alcohol, while on company time and that if I am employed by VACCO such activity may result in immediate termination of my employment.

I also understand that if I am employed by VACCO, my employment is at will, that I or the company may terminate or change the employment relationship at any time, for any reason, with or without notice. I further understand that no employee of the company has the authority to modify this understanding orally or in writing except in a written document indicating that it is a contract of employment signed by the President of VACCO.

I certify that the answers given to the questions and the statements made on this application and in the hiring process are true. I understand that a false statement, a false answer, an omission, or a misleading statement may result in a decision not to hire me, the withdrawal of any offer of employment, or the termination of my employment with the Company regardless of when such false, misleading or erroneous information is discovered.

I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE AND AGREE TO EACH AND ALL OF THESE STATEMENTS:

Signature (Acknowledgement)

Date