

Certification and Release Statement:

_____ I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification, omissions or misrepresentation of facts on this application or on any document used to secure employment may result in refusal to hire or if hired, dismissal, regardless of the time elapsed before discovery.

_____ I authorize any persons or organizations referenced in this application, as well as law enforcement authorities, to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regards to any subjects covered by this application and release all such parties from all liability for any damage that may result from furnishing such information to you. I authorize you to request and receive such information, in the process of being considered for employment by your company.

_____ I agree to conform to the guidelines of the company and acknowledge that these guidelines may be changed, interpreted, withdrawn, or added to by your company's sole option and without any prior notice to me. I further acknowledge that my employment may be terminated, and any offer of employment, if such is made, may be withdrawn, with or without cause, and with or without any prior notice at any time, at the option of the company or myself.

_____ I understand and acknowledge that any offer of employment is expressly conditioned upon my completion of preemployment medical questionnaire, a review by the company's physicians of responses to that questionnaire and any other medical records that the company may wish to obtain, satisfactory completion of any further medical examinations that may be required by the company, and a determination by the company that I am qualified to safely perform the job sought without a significant risk of future injury.

_____ I also understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug and alcohol testing to detect the use of illegal drugs prior to and during employment. I further understand that even though this review process may take several weeks, and any offer of employment remains conditional until it has been approved by the company's personnel officer.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL THE ABOVE TERMS

Applicant's Signature

Date

Printed Name