**CENTENNIAL** BOLT, INC.

Check One:	
New Applicant	
Transfer Applicant	Ľ
<b>Reemployment Applicant</b>	Ľ

- Hiring decisions are based on qualifications without regard to race, religion, color, sex, age, national origin, citizenship, genetic information, disability, military/veteran status, sexual orientation/preference, gender identity/expression, marital status, pregnancy or any other characteristic protected by law.
- Applicants with disabilities who need assistance to complete this Application or to participate in any other way in the Company's recruitment and hiring process should contact HR as far in advance as possible. Phone: (303) 371-1370 or Email: ineal@centennialbolt.com
- To be considered, applications must be completed in full, signed, and dated, even if attaching a resume.
- Applications will normally be considered active for a period of 30 days or until the position is filled.

■ If you need more space to fully respond to any questions, please attach additional pages as necessary.

### PERSONAL DATA

Last Name First	Name	Middle Name or Initial
List all different/previous name(s) so the Company c	an make appropriate reference checks ar	nd verifications:
Present Address (Number and Street)	City	State Zip Code
Personal Email	Home Phone No.	Cell Phone No.
Are you 18 years of age or older? Yes No No Workforce Commission.)	Minors may be required to provide a Ce	ertificate of Age issued by the Colorado
Are you legally eligible to work in the United State	s?Yes 🗌 No 🗌	
Have you previously applied for a job with, or worke employed by one or more of these companies, for reason for leaving.		
List all family members, relatives, friends, and acquainc.	intances who currently work for or who pr	reviously worked for Centennial Bolt,

Are you covered by a non-compete, non-solicitation, or confidentiality agreement with a current /former employer? Yes  $\square$  No  $\square$  If yes, explain in detail.

POSITION AF	PLYING FOR			
Position		Full Time	Date Available	Desired Pay
		Part Time 🗌		
Source of referral:	Agency (name)	Own Initiative	•	
	Publication (name)	Employee (name)		
	School/Organization	Other		
Please explain any	limitations to your work availability including the	he ability to work n	ights weekends and/o	or overtime if requested

Please explain any limitations to your work availability, including the ability to work nights, weekends, and/or overtime if requested or required.

Have you reviewed the Job Description for the position you are applying for? Yes 🗌 No 🗌

If the position requires standing, lifting, bending, stooping, climbing, reaching, pulling, pushing, or any other physical effort to perform essential job functions, are you able to perform such functions with or without a reasonable accommodation? Yes No

Do you have reliable transportation? Yes 🗌 No 🗌	If position requires out-of-town and/or overnight travel, are you willing and able to do so? If no, explain.
DRIVER'S LICENS	E/DRIVING RECORD
If the position you are app	lying for requires you to drive, please answer the following questions:
Do you have a valid Driver If you are applying for a posit If "yes", what is your Drive	tion in a state other than Colorado , do you have a valid driver's license in that state? Yes 🗌 No 🗌
	of, or have you pleaded guilty or no contest (nolo contendere) to, or received deferred adjudication for, a g a DUI or DWI in the past four years? Yes 🗌 No 🗌 If yes, please explain:
List all driving violations y	ou have had during the past four years, including the date and type of violation.
Do you maintain at least the	ninimum liability insurance required under Colorado Iaw? Yes 🗌 No 🗌
If the job you are applying law? Yes	for is in another state, do you maintain at least the minimum liability insurance require under that state's
EMPLOYMENT HI	STORY
	Ill-time, part-time, and temporary employment history, including all self-employment and military service. Begin ecent) job. Note any periods in which you were not employed. Include all employment, even if you only worked a

short time. Attach additional pages if necessary to provide complete work history. If you were fired, asked to resign, abandoned your joor left under less than favorable circumstances, describe in detail. We may contact all employer(s) listed unless you specification				
	•		ed unless you specifi	cally
indicate those whom you do not want us to contact	and the reason for your requ	iest.		
Name of Employer		Title or Posit	ion	
Address	City	State	Zip Code	
Employment Dates (Month and Year)		Area Code/P	hone No.	
From: To:				

Name, Title, & Contact Info of Immediate Supervisor

Reason for Leaving

**Description of Duties** 

Name of Employer		Title or Posit	tion
Address	City	State	Zip Code
Employment Dates (Month and Year) From: To:		Area Code/Phone No.	
Name, Title, & Contact Info of Immediate Supervis	or		
Reason for Leaving			
Description of Duties			
Name of Employer		Title or Posit	tion
		The of Fosh	
Address	City	State	Zip Code
Employment Dates (Month and Year) From: To:		Area Code/P	hone No.
Name, Title, & Contact Info of Immediate Supervis	or		
Reason for Leaving			
Reason for Leaving Description of Duties			
Description of Duties		Title or Posit	tion
		Title or Posit	tion
Description of Duties	City	Title or Posit	tion Zip Code
Description of Duties	City		Zip Code

Reason for Leaving

**Description of Duties** 

(Add additional sheets if necessary)

EDUCATION				
	High School or General Equivalency Diploma (GED)	Undergraduate College/University	Graduate/ Professional	Business/ Technical
School Name & Location				
Dinloma / Degree /				
Diploma / Degree / Credits				

Describe Course of			
Study	Describe Course of Study		

# TRAINING Sponsoring Organization and Location Name of Course, Seminar, etc. CEU's # of Hours Dates Image: Constraint of the second second

# SPECIAL KNOWLEDGE, SKILLS, QUALIFICATIONS, & BACKGROUND

List office machines/equipment you can operate, including computer programs/software proficiency, if relevant to job you are applying for:

List any heavy equipment or machinery you can operate if relevant to the job you are applying for:

List languages that you speak, read, write, and indicate fluency in each.

Summarize any special skills, qualifications, activities, certifications, licenses, awards, and other achievements relevant to the job applied for that you have not listed elsewhere in this application.

Explain why you are interested in working for us and provide any additional information you feel may be helpful in considering your application.

### REFERENCES

List persons, other than relatives, who know you, your qualifications, and/or your background.

Name & Relationship to You	Profession	Phone Number & Email	Business or Home Address



# APPLICANT'S ACKNOWLEDGMENT AND AUTHORIZATION

The information I provided on this employment application is true, correct, and complete to the best of my knowledge. I understand that false statements, misleading statements, or omission of facts on this application, on my resume, or during the interview and hiring process, will likely disqualify me from further consideration, or if hired, my dismissal from employment.

I acknowledge that consideration for employment is contingent on the results of a reference and background check. I hereby authorize Centennial Bolt, Inc. (collectively, the "Company") to (1) investigate the truthfulness and completeness of all information on my application, in my resume, and otherwise provided during the recruitment and hiring process; (2) contact my schools, former and current employers (except for those employers that I have specifically identified on the application that may not be contacted) and other listed references or any other persons who may be able to verify information, including law enforcement personnel; and (3) discuss the results of any investigation with other Company employees involved in the hiring process. In addition, I give my consent for all contacted persons, including former and current employers, to provide the Company with information about me, and I release the Company and each such person from liability that may result from the release and/or use of such information.

I also agree to provide the Company with any other authorization or release it needs to complete its background investigation and to determine my suitability for employment, or continued employment, as the case may be. This includes specific documents that establish my identity and eligibility for employment in the United States.

If I am offered a job by the Company, I understand the offer may be contingent on a criminal background check and/or my taking and passing a drug and/or alcohol test. Job offers in certain positions may also be contingent on a medical exam performed by a medical professional selected by the Company. The Company pays for all such exams.

I understand that employment with the Company is at-will, meaning it is for no definite period, and either I or the Company may terminate the employment relationship at any time, with or without notice or cause. I also understand that only the Company's President and/or Vice President has the authority to enter into an employment agreement on behalf of the Company for a specific period of time and that any such agreement must be in writing and signed by me and the President and/or Vice President.

If I am hired, I agree not to use or disclose in any way any of the Company's trade secrets or its other confidential, proprietary, and/or restricted information except as necessary to perform my job duties while employed by the Company. If I am hired, I further agree not to use or disclose in any way a vendor's, supplier's, customer's, or business partner's confidential information obtained as a result of my employment with Company except as necessary to perform my job duties while employed by the company.

If I am hired, all right, title, and interest, including, without limitation, all copyrights and patents, in and to any material produced or inventions developed by me during my employment that affect or relate to the Company's business or affect or relate to the Company's industry shall vest in the Company and I shall have no personal right, title, or interest whatsoever therein.

If I am hired, the Company may furnish to others information about my employment record, work habits, and work performance with the Company. I specifically release Company, its officers, agents and employees from any and all liability regarding such release.

I authorize the Company to communicate with me using my personal email address that I set out on page 1 of this Application. If hired, I authorize the Company to communicate with me using my personal email address for all purposes, including all required notices and communications under the FMLA. I will promptly notify HR if my email address changes.

If I am submitting my application electronically, I agree that my electronic signature is the legally binding equivalent to my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.