

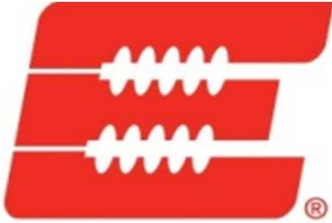


1361 Glory Road
Green Bay, WI 54304
Phone: 920 632 7929
Fax: 920 632 7928

Print Name: _____

Position Applying For: _____

Date: _____



energis

HIGH VOLTAGE RESOURCES, INC.®

EMPLOYMENT APPLICATION

Energis High Voltage Resources, Inc. is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

PERSONAL

Last Name	First	Middle Initial	Social Security #
Other Name(s) Used			Home Telephone # ()
Address			Cell # ()
Street	City	State	Zip
			Business or Message # ()
Position Applied For		Referred By	Salary Desired
Have you ever interviewed with the Company or its affiliates before? (circle one)		Yes No	If yes, list date(s), job title(s) & location(s)
Have you ever been employed by the Company or its affiliates before? (circle one)		Yes No	If yes, list date(s), job title(s) & location(s)
Do you have any relatives employed by the Company or its affiliates? (circle one)		Yes No	If yes, list names
Are you at least 18 years old? (circle one)		Yes No	If under 18, do you have a work permit?
What days and hours are you available to work?			

EDUCATION

Circle Highest Grade Completed:

High School	9	10	11	12
College, Trade, Business	1	2	3	4
Graduate Studies				

School	Address	Major Studies	Degree, Diploma, License, or Certificate
High School			
College/University			
Vocational, Business, Other			
List any Professional Designations			
Other Special Knowledge, Skills or Qualifications			

Do you type?	Yes	No	If Yes, Words per Minute:
Computer Skills (Hardware/Software)			

EMPLOYMENT HISTORY

List employment starting with the most recent position. All information **MUST** be completed. You may attach a resume, but not in place of completing the required information.

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason For Leaving	
Duties & Responsibilities			

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason For Leaving	
Duties & Responsibilities			

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason For Leaving	
Duties & Responsibilities			

PERSONAL REFERENCES (Not relatives)

Name	Occupation	Address	Telephone Number
			()
			()
			()

GENERAL

Yes No If hired, will you be able to work overtime?

Yes No Do you think you will be able to handle the physical aspects of this job? If no, please explain:

CERTIFICATION & AUTHORIZATION

The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional, and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents, which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. I hereby acknowledge that I have read and agree to the above statements.

Signature

Date

DRUG-FREE WORKPLACE POLICY

The following policy is required by the Drug-Free Workplace Act and complies with applicable law concerning drug use in the workplace.

- 1) Employees are expected and required to report to work on time and in appropriate mental and physical condition for work. It is our intent and obligation to provide a drug-free, healthful and safe work environment.

- 2) The unlawful manufacture, distribution, possession or use of a controlled substance on the Company's premises or while conducting the Company's business off its premises is absolutely prohibited. Violations of this policy will result in disciplinary action, up to and including termination, and may have legal consequences.

- 3) Employees must report any conviction under a criminal drug statute for violations occurring on or off the Company's premises while conducting Company business. A report of a conviction must be made within seven (7) days after the conviction.

- 4) The Company recognizes drug dependency as an illness and a major health problem. The Company also recognizes drug abuse as a potential health, safety, and security problem. Conscientious efforts to seek such help will not jeopardize any employee's job and will not be noted in any personnel record.

I have read, understand and agree to the Company's Drug-Free Workplace Policy.

Print Name

Sign Name

Date

EMPLOYEE EMERGENCY NOTIFICATION FORM

In the event of an emergency, I the undersigned employee, authorize Energis High Voltage Resources, Inc. (the Company) to notify the following person:

Name: _____

Phone Number: _____

Address: _____

Relationship to Employee: _____

In the event you are unable to notify such person, (the Company) is authorized to notify:

Name: _____

Phone Number: _____

Address: _____

Relationship to Employee: _____

I understand and agree that (the Company) will have no obligation or liability to notify such persons.

Employee Signature

Date

Printed Employee Name

APPLICANT'S DISCLOSURE & CONSENT RELEASE OF INFO.

In connection with, and for the duration of, my employment (including contract for services), I understand that my employer may obtain "consumer reports" and/or "investigative consumer reports" for employment purposes that relate to my credit, criminal, driving, employment, or education history. This information will, in whole or part, be obtained from Attorney's Process & Investigation, Services, Inc. ("API"), 205 Doty St STE 202, Green Bay, WI 54952, telephone 800-236-5202. These reports may include information as to my general reputation, character, personal characteristics, mode of living, work habits, job performance, and experience, along with reasons for termination of past employment from previous employers. I understand my employer may be requesting information from various federal, state, and other agencies or institutions, which maintain public and non-public records concerning my past activities relating to my driving, credit, civil, education, and other experiences. I further understand that I have the right to request, in writing, the nature and scope of any investigative consumer report and a Summary of Consumer Rights as prescribed by Section 606 of the Fair Credit Reporting Act.

I authorize, without reservation, any party, institution, or agency contacted by API or my employer to furnish the above mentioned information.

_____ Applicant Name	_____ Date of Birth* <small>*Date of Birth is requested to obtain accurate retrieval of records</small>	_____ Social Security Number
_____ Aliases/Previous Name(s)		
_____ Current Address	_____ City/State	_____ Zip Code
_____ Driver's License #	_____ State	_____ Prospective Employer

_____ **California, Minnesota, and Oklahoma Applicants Only:** Please check here to have a copy of your consumer report sent directly to you. Minnesota and Oklahoma applicants will receive a copy directly from API. California applicants may receive a copy from either the prospective employer or API.

Notice to California Applicants

Under Section 1786.22 of the California Civil Code, you have the right to request from API, upon proper identification, the nature and substance of all information in its files on you, including the sources of information, and the recipients of any reports on you, which API has previously furnished within the two-year period preceding your request. You may view the file maintained on you by API during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services. Upon making a written request, you may receive a summary of your report via telephone.

Notice to Maine Applicants

Under Chapter 210 Section 1314 of Maine Revised Statutes, you have the right, upon request, to be informed within 5 business days of such request of whether or not an investigative consumer report was requested. If such report was obtained, you have contact the Consumer Reporting Agency and request a copy.

Notice to New York Applicants

Under Article 25 Section 380-c (b) (2) of the New York General Business Law, you have the right, upon written request, to be informed of whether or not an investigative consumer report was requested.

Under Article 25 Section 380-g of the New York General Business Law, should a consumer report received by an employer contain criminal conviction information, the employer must provide to the applicant or employee who is the subject of the report, a printed or electronic copy of Article 23-A of the New York Correction Law, which governs the employment of persons previously convicted of one or more criminal offenses.

___ Please initial here to acknowledge receipt of Article 23-A of the New York Correction Law.

Applicant Signature _____ Date ____/____/_____

WRITTEN DISCLOSURE OF INTENT TO OBTAIN CONSUMER REPORT/INVESTIGATIVE CONSUMER REPORT FOR EMPLOYMENT PURPOSES

You are hereby notified that **API Services, Inc.** in connection with your employment, and for the duration of your employment with **Energis High Voltage Resources, Inc.** may obtain a consumer report regarding you for employment purposes as part of any employment background investigation. A consumer report means any information provided by one or more consumer reporting agencies that bears on a consumer's credit-worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, which is used or expected to be used for the purpose of establishing eligibility for employment, promotion, reassignment, or continued employment.

The consumer report could also include an "investigative consumer report," which includes information such as that described above, and which is obtained through personal interviews with neighbors, friends, co-workers, or others with whom you may be acquainted. With respect to any investigative consumer report, you have the right to request additional disclosures regarding the nature and scope of the investigation. You have the right to request a written summary of your rights under the Fair Credit Reporting Act.

This notice is provided pursuant to the FCRA, 15U.S.C.s. 1681b(b)(2).

EMPLOYEE AUTHORIZATION FOR THE PROCUREMENT OF CONSUMER/INVESTIGATIVE CONSUMER REPORT FOR EMPLOYMENT PURPOSES

I, _____, hereby authorize **API Services, Inc.** and one or more consumer reporting agencies, acting on behalf of **Energis High Voltage Resources, Inc.** in connection with my employment, and for the duration of my employment with **Energis High Voltage Resources, Inc.** to investigate my employment history, personal history, criminal history, and financial and other records by, among other things, procuring a consumer report, including an investigative consumer report, regarding me for employment purposes. I acknowledge that **Energis High Voltage Resources, Inc.** has provided to me, and I have read this Written Disclosure of Intent to Obtain Consumer Report/Investigative Consumer Report for Employment Purposes.

Witness

Date

Signature