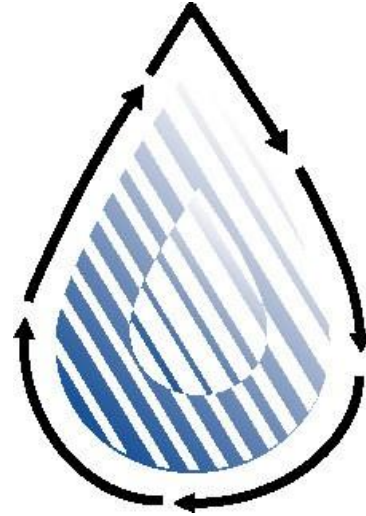


NAME: _____
Last First Middle

DATE _____

POSITION YOU ARE APPLYING FOR _____



ORG Chem Group,
LLC.

APPLICATION FOR
EMPLOYMENT

APPLICATION FOR EMPLOYMENT

Please Complete All Portions Of This Application In Its Entirety.
Do Not Refer To Resume Entries.

PERSONAL

Name _____ Social Security No. _____
Last First Middle

Present Address _____
Street City State Zip

Previous Address _____
Street City State Zip

Home Telephone () _____ Business Telephone () _____ Ext. _____

NOTICE TO ALL APPLICANTS
 Federal Law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time period will result in immediate termination.
 Any offer of employment that may be made to you is contingent on your submission of satisfactory proof of your identity and legal authorization to work in the United States.
 If you fail to submit this proof, Federal Law prohibits us from hiring you.

Are you 18 years of age or older? Yes No If a minor, do you have a work permit? Yes No

EDUCATION

Type of School	Name of School	Major and Minor Courses	Years Completed	Give Degrees or Certificates	Letter Grade/ GPA
High School	Name _____		9 10 11 12		
	City _____ State _____				
College	Name _____		1 2 3 4		
	City _____ State _____				
Graduate School	Name _____		1 2 3 4		
	City _____ State _____				
Business or Technical School	Name _____		1 2 3 4		
	City _____ State _____				

Professional Licenses: _____
 Vocational or Trade Training: _____
 Computer Skills: _____
 Special Skills or Machines Operated: _____

EMPLOYMENT RECORD

List places of employment including temporary and permanent • **BEGIN WITH MOST RECENT OR CURRENT EMPLOYER** •
Fully Complete All Information • Do Not Refer To Resume Entries • List Telephone Numbers for contact during business hours.

Dates	Employer		Position	Immediate Supervisor	Reason for Leaving	Salary
Starting	Name	Telephone ()	Starting	Name		Starting
Ending	Address		Ending	Title		Ending

Briefly list job responsibilities - specific accomplishments – contributions: (Attach additional sheet if necessary)

Dates	Employer		Position	Immediate Supervisor	Reason for Leaving	Salary
Starting	Name	Telephone ()	Starting	Name		Starting
Ending	Address		Ending	Title		Ending

Briefly list job responsibilities - specific accomplishments – contributions: (Attach additional sheet if necessary)

Dates	Employer		Position	Immediate Supervisor	Reason for Leaving	Salary
Starting	Name	Telephone ()	Starting	Name		Starting
Ending	Address		Ending	Title		Ending

Briefly list job responsibilities - specific accomplishments – contributions: (Attach additional sheet if necessary)

Dates	Employer		Position	Immediate Supervisor	Reason for Leaving	Salary
Starting	Name	Telephone ()	Starting	Name		Starting
Ending	Address		Ending	Title		Ending

Briefly list job responsibilities - specific accomplishments – contributions: (Attach additional sheet if necessary)

May we contact your present employer at this time? Yes No

Have you ever been discharged? Yes No

UNITED STATES MILITARY SERVICE

Have you received any job-related training in the United States Military? Yes No

Type of work or duties _____

GENERAL

Position Applied For _____ Salary / Rate Expected _____ Date You Can Start _____

Indicate the hours and days you are available to work:

From:	Sun	Mon	Tue	Wed	Thu	Fri	Sat
To:							

Total number of hours available to work each week: _____
 Would you be available to work overtime? Yes No
 Are you willing to work an irregular schedule? Yes No
 Do you have transportation available to and from work? Yes No

If applying for position where driving is required, do you have a valid drivers license in this state? Yes No

Have you ever been arrested for or convicted of a crime that has not been expunged by a court? Yes No (Answering yes to this question does not necessarily disqualify you from employment).

PERSONAL REFERENCES Do not list relatives or former employers.

Name	Occupation	Name	Occupation
Address	Telephone Day ()	Address	Telephone Day ()
City & State	Telephone Evening ()	City & State	Telephone Evening ()
Name	Occupation	Name	Occupation
Address	Telephone Day ()	Address	Telephone Day ()
City & State	Telephone Evening ()	City & State	Telephone Evening ()

I certify that the information contained in this application is true and correct without any omissions of any kind whatsoever. I hereby acknowledge my understanding that falsification of the information given or the omission of any necessary or relevant information is grounds for refusal to hire or, if hired, for termination. I agree that CHEM Group, Inc. called "The Company" herein, shall not be liable in any respect if my employment is terminated because of any such false statements or omission.

I hereby authorize all of my prior employers, the officials of all schools which I have attended or been associated with, any person named above or on this application blank, all public officials, or any other person or entity to give any information regarding my employment, whether or not it is on their records. I hereby release said employers, schools, public officials and other persons and entities, from any and all liability for any damage whatsoever which might result from their revealing or publishing this information, now or in the future.

I understand and agree that an investigation may be made whereby information is obtained through credit references, law enforcement agencies, my business or personal references and personal interviews with neighbors, friends, and others with whom I am acquainted. This may include information as to character, general reputation, or personal characteristics. Further, I release these sources from any liability resulting from providing such information.

If employed, I agree to conform to the policies and procedures of the Company and acknowledge that these may be changed, interpreted, withdrawn, or amended by the Company at any time, at the Company's sole option and without any prior notice to me.

I further acknowledge that my employment, or any offer of employment, if such is made, is for no definite period regardless of the state of payment of wages or salary, may be terminated with or without cause, and with or without prior notice, at any time, even after acceptance, at the option of the Company or myself.

I acknowledge and permit that, from time to time, the Company may be required to submit certain information with regard to my employment or application and release the Company, its agents, assigns and organizational units from any liability resulting from submission of such information.

I understand that the use of this form does not indicate that there are positions open and does not in any way obligate the Company.

I hereby acknowledge that I have read and fully understand the meaning and importance of the foregoing as well as the fact that no contract of employment exists between myself and the Company and, further, that in the event I am employed by the Company, I would be employed at-will and this employment application will constitute a full and complete statement of the terms and conditions of my employment and that no contract of employment can be inferred to exist unless specifically agreed to in writing by the Company, and further, that I am aware of the consequences of affixing signature hereto.

An Equal Opportunity Employer

Applicant Signature _____

Date _____