

APPLICATION FOR JOINING THE WIMCO FAMILY

General Contractors PO Box 121 2533 West 5th Street, Washington NC

WIMCO Corp is proud to be named one of the Best Employers in North Carolina. At WIMCO, we believe in doing the right thing no matter what it takes. Through hard work, honesty and integrity, we deliver promises on time, every time. We believe in our team and our success begins with inspired individuals.

Please provide us with a brief summary on why you would like to join our team and WHY WIMCO should consider you?		

PERSONAL INFORMATION:

Incomplete information could disqualify you from further consideration. Please complete all fields.

NAME:	DATE:
ADDRESS:	
CITY:	STATE: ZIP:
PHONE: () -	MOBILE PHONE:(
SOCIAL SECURITY NUMBER:	
Are you related to a current employee of V Name of Relative:	VIMCO Corp? O Yes O No
EMPLOYMENT INFORMATION:	
Are you eligible to work in the U.S.?	Yes O No
Are you at least 18 years of age or older? (If n	o, you will be required to provide authorization to work) O Yes O No
Position Desired:	
Date you can start:	Hourly Rate/Salary Desired:_\$
Can you work any shift: O Yes O N	O
Can you work overtime (including weeken	ds): O Yes O No
Are you currently employed? • Yes	O No
If so, may we inquire of your present empl	over? O Yes O No

REFERRAL SOURCE: How did you hear about us? O Advertisement O Referral O Walk In O Website Have you ever applied with WIMCO before? O Yes O No If yes, please tell us when you applied and for what position: Do you know anyone who works for our company? O Yes O No If yes, who? How long have you known them? **EDUCATION:** Number of Years Name of School Education **Degree Received** Major / Location Attended High School College or University Trade or Business School **Employment History:** (include last 10 years) of employment history, including periods of unemployment, starting with the most recent and working backwards in time. Incomplete information could disqualify you from further consideration. FROM:______TO:_____JOB TITLE:_____ EMPLOYER: _____EMPLOYER'S PHONE #: (_____) SUPERVISORS NAME/TITLE: Summarize the nature of work performed and job responsibilities:

REASON FOR LEAVING:

FROM:	TO:	JOB TITLE:
EMPLOYER:		EMPLOYER'S PHONE #: ()
SUPERVISORS I	NAME/TITLE:	
		d and job responsibilities:
		d and job responsibilities.
REASON FOR LE	EAVING:	
FROM:	TO:	JOB TITLE:
EMPLOYER:		EMPLOYER'S PHONE #: <u>(</u>)
SUPERVISORS I	NAME/TITLE:	
Summarize the nati	ure of work performe	d and job responsibilities:
REASON FOR LE	EAVING:	
		JOB TITLE:
EMPLOYER:		EMPLOYER'S PHONE #: ()
SUPERVISORS I	NAME/TITLE:	
Summarize the nati	ure of work performe	d and job responsibilities:
DE400N 505 : 5	- 4.7 (18.10)	
		JOB TITLE:

EMPLOYER:		EMPLOYER'S PHONE #: ()	
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	·	ed and job responsibilities:	
REASON FOR LE	AVING:		
FROM:	10:	JOB TITLE:	
EMPLOYED.		EMPLOYED'S DUONE #. (
EMPLOYER:		EMPLOYER'S PHONE #: ()	
	JAME/TITLE:		
		ed and job responsibilities:	
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REASON FOR LE	AVING:		
	<i>'</i> ''		
Employment Hi	story: (continue	<u>3a)</u>	
Do you have any	special skills, expe	erience and/or training that would enhance your ability to perform the	
position applied for	or? If yes, explain	า:	
COMPUTER SKIL	LS: (please desci	eribe)	
	·		

References: (give the names of three persons not related to you, whom you have known at least three (3) years).

NAME	Address, Phone, Email	Company Name or Personal	Years Acquainted

<u>Please read carefully before signing:</u> WIMCO Corp I an equal opportunity employer. It is our policy to choose and hire the best-qualified men and women, regardless of race, creed, color, age, sex, national origin, veteran status, religion, citizenship, disability, or other legally protected status.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for WIMCO Corp to hire me. If I am hired, I understand that either WIMCO Corp or I can terminate my employment at any time and for any reason, without cause and without prior notice. I understand that no representative of WIMCO has the authority to make any assurance to the contrary.

WIMCO Corp has establishes a Substance Abuse Policy, which prohibits the unlawful manufacture, distribution, sale, possession, or use of alcohol, drugs, or other controlled substances on its property, vehicles, or worksites. Compliance with this policy is a condition of employment. An essential part of this policy is the utilization of drug testing. Applicants offered employment will be tested prior to becoming an active employee and subject to random testing thereafter.

The undersigned hereby acknowledges being notified of the Substance Abuse Policy and hereby agrees to it. In addition, the undersigned attests that he/she has given to WIMCO Corp true and complete information on this application. No requested information has been concealed. My signature also authorizes WIMCO Corp to contact references provided for employment reference checks. I understand that any misrepresentation or omission of facts is cause for dismissal. Further, I understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time without previous notice.

DATE:	SIGNATURE:
DATE.	JONATOKE.