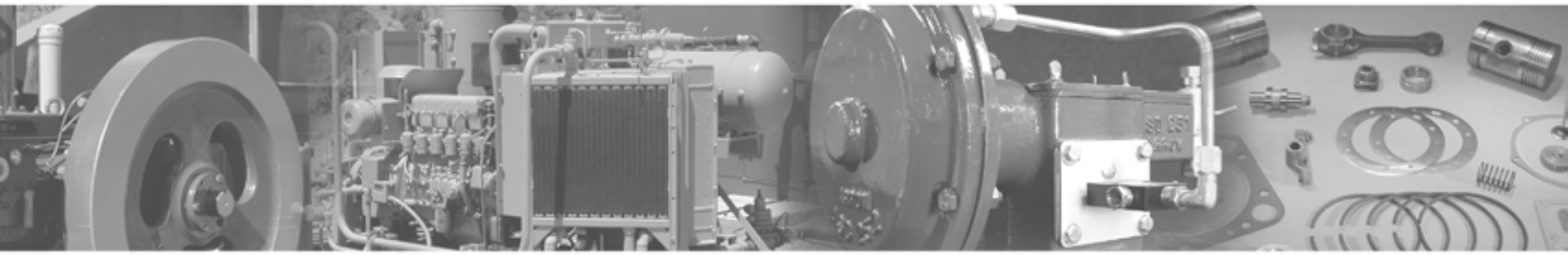


Date: _____



APPLICANT'S NAME: _____

Please Print

Arrow Engine Company is committed to the policy of equal employment opportunity in its personnel and employment practices. Your job-related experience and other qualifications will be considered without discrimination on grounds of race, color, religion, sex, national origin, age, disability, or any other basis protected by applicable Federal or State Law.

Personal Data

Name _____ Social Security Number _____

Home Address _____ Telephone _____

City _____ State _____ Zip _____

Drivers License Number _____

In case of emergency notify _____ Telephone _____

Are you 18 years or older? Yes ____ No ____ Are you legally eligible for employment in the U.S.A.? Yes ____ No ____

Have you ever been interviewed for employment by Arrow Engine Company? Yes ____ No ____

If yes, by whom? _____ Location _____

Were you ever employed by Arrow Engine Company or its affiliates? Yes ____ No ____

From _____ To _____ Location _____

Reason for leaving _____

List any friends or relatives working for us or who have worked for us _____

Is there any reason you cannot perform all of the tasks of the job for which you are applying with or without an accommodation?

Have you ever been convicted of a crime excluding misdemeanors and summary offenses which have not been annulled or expunged or sealed by a court? Yes ____ No ____

If you answered yes to the above question, describe _____

NOTE: Conviction or pending felony charges will not necessarily disqualify an applicant

Have you ever been denied a Surety Bond? Yes ____ No ____

Geographical preference _____ Are you willing to relocate? Yes ____ No ____

Employment Desired

Position _____

Other positions you would consider _____

Will you work overtime on occasion if necessary? Yes ____ No ____

Do you have any obligations which would affect working as scheduled? Yes ____ No ____

Military

Were you in U.S. Military Service? Yes ____ No ____ If yes, what branch _____

Dates of service _____ Rating or Rank achieved _____

Special training received _____

Education

<i>Institution</i>	<i>No. of Years Attended</i>	<i>Course of Study</i>	<i>Diplomas or Degree(s) Acquired</i>
High School			
College			
Other Training			

Computers, equipment, or software you can operate that are related to the position for which you are being considered

Employment History

(Start with most recent position)

1. Employer _____ Address _____
 Type of Business _____ Position/ Title _____
 Primary Responsibilities _____
 From _____ To _____ Starting Salary _____ Leaving Salary _____ Supervisor's Name _____
 Reason for Leaving _____

2. Employer _____ Address _____
 Type of Business _____ Position/ Title _____
 Primary Responsibilities _____
 From _____ To _____ Starting Salary _____ Leaving Salary _____ Supervisor's Name _____
 Reason for Leaving _____

3. Employer _____ Address _____
 Type of Business _____ Position/ Title _____
 Primary Responsibilities _____
 From _____ To _____ Starting Salary _____ Leaving Salary _____ Supervisor's Name _____
 Reason for Leaving _____

4. Employer _____ Address _____
 Type of Business _____ Position/ Title _____
 Primary Responsibilities _____
 From _____ To _____ Starting Salary _____ Leaving Salary _____ Supervisor's Name _____
 Reason for Leaving _____

5. Other positions and periods of employment

<i>Employer</i>	<i>Primary Responsibilities</i>	<i>From</i>	<i>To</i>	<i>Salary</i>	<i>Reason for Leaving</i>
_____	_____	_____	_____	_____	_____

References

(List Two - Do Not List Relatives)

1. Full Name _____ Telephone _____
Address _____ Relation _____
1. Full Name _____ Telephone _____
Address _____ Relation _____

Read Carefully Before Signing

I understand that in the event I am employed by the Company, I am employed "at-will," which means the term of employment is not definite and my employment may be terminated at any time, with or without cause, or notice, by either myself or my employer. This statement constitutes the entire agreement between the Company and myself on the subject of termination, lay off and/or discharge and can only be changed by a written agreement directed exclusively to me and signed and executed by the President of the Company and me.

I agree that in exchange for consideration of my possible employment with the company I will be bound, as though an employee, by the Corporate Dispute Resolution Policy. Further, in the event of employment, I will also be bound by the Corporate Dispute Resolution Policy. As a result, Mediation, and if successful, Arbitration will be the sole and exclusive remedies for any claims covered by the Corporate Dispute Resolution Policy and I agree not to pursue any such claims in Court through a judge or a jury. I acknowledge that I have had the opportunity to review the Corporate Dispute Resolution Policy prior to signing this document.

I represent that the answers and information given by me in this application are true and complete to the best of my knowledge. Without limiting the at-will employment relationship, I understand that my employment may be terminated at any time if you discover that I have provided incomplete, untrue or misleading answers in the Application, or on any other document or form executed by me at any time during my employment.

I hereby authorize you to verify the information given and to investigate my background as deemed necessary. I authorize former employers, personal references, or any other agencies, Institutions or persons (collectively referred to as "person"), agree to hold harmless from liability and covenant not to sue any person providing information pursuant to this authorization. I hereby waive my right to written notice by my present and/or former employers whenever a disciplinary report, letter of reprimand or other disciplinary action regarding me is divulged to you by present or former employers.

I understand that an investigative consumer report may be ordered by the Company on my character, general reputation, personal characteristics and mode of living and that the Company will, upon my written request, provide me with additional information as to the nature and scope of any such report.

If employed, I consent to Direct Deposit of all Compensation by Electronic Transfer

Date _____ Applicant's Signature _____

Do Not Write Below This Line

(For Personnel Department Use Only)

Interviewed by _____ Date _____

Hired Yes _____ No _____ Position _____

Starting Compensation _____ Starting Date _____

COMMENTS _____