APPLICATION FOR EMPLOYMENT

BARCELONA EQUIPMENT, INC. is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law

| INTRODUCTORY INFORMATION: | | | | | | |
|---------------------------------------|---------------------------|----------------------|-----------------------|--------------|--|--|
| Name: | | Date: | | | | |
| Phone: | Address: | | | | | |
| City: | State: Zip: | | | | | |
| APPLICANT QUESTIONS: | | | | | | |
| Type of work desired: | Date Available: | | | | | |
| If hired, can you provide documents i | required to establish you | ır eligibility to wo | ork in the U.S.? Y | TES NO | | |
| Have you ever worked at Barcelona E | Equipment, Inc. before? | | | | | |
| How were you referred to Barcelona | Equipment? | | | | | |
| EDUCATION: | | | | | | |
| SCHOOL NAME | COURSE OF STUDY | | DEGREE /CERTIFICATION | | | |
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| MILITARY EXPERIENCE: | | | | | | |
| BRANCH OF SERVICE | ТО | FROM | RANK/TYPE | E OF SERVICE | | |
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RECORD OF EMPLOYMENT:

List positions starting with most recent:

| Employer: | Phone: | | | | |
|--------------------------|-------------|----------------|---------|--|--|
| Address: | | | | | |
| Position Title: | Supervisor: | _ Supervisor: | | | |
| Start Date: | End Date: | nd Date: | | | |
| Duties: | | | | | |
| Reason for Leaving: | | | | | |
| | | | | | |
| Employer: | Phone: | | | | |
| Address: | | | | | |
| Position Title: | Supervisor: | | | | |
| Start Date: | End Date: | | | | |
| Duties: | | | | | |
| Reason for Leaving: | | | | | |
| | | | | | |
| Employer: | Phone: | | | | |
| Address: | | | | | |
| Position Title: | | | | | |
| | End Date: | | | | |
| Duties: | | | | | |
| Reason for Leaving: | | | | | |
| WORK RELATED REFERENCES: | | | | | |
| WORK RELATED REFERENCES: | | | | | |
| NAME | OCCUPATION | YEARS KNOWN | CONTACT | | |
| | | | | | |
| | | | | | |
| | | | | | |

EQUIPMENT EXPERIENCE & QUALIFICATIONS:

PLEASE LIST ALL TYPES OF EQUIPMENT OPERATED AND CERTIFICATIONS

| # OF YEARS EXPERIENCE | EQUIPMENT | | CERTIFICATION | | | RIGGING/SIGNAL | | |
|--------------------------------------------------------------------------------------------------------|-----------|----------------|---------------|--|--------------|----------------|------------|--|
| | | | | | | | | |
| | | | | | | | | |
| OTHER | | | | | | | | |
| DRIVER EXPERI | ENCE & (| QUALIFICATIONS | S: | | | | | |
| DRIVERS LICENS | Е | STATE | STATE CLASS | | ENDORSEMENTS | | EXPIRATION | |
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| | | | | | | | | |
| Have you ever been denied a license, permit or privilege to operate a motor vehicle? YES NO | | | | | | NO | | |
| Has any license, permit or privilege ever been suspended or revoked? | | | | | | YES | NO | |
| Have you ever been disqualified for violations of the Federal Motor Carrier Safety Regulations? YES NO | | | | | | NO | | |
| If you answered yes to any of the above questions, please provide details: | | | | | | | | |
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| TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST THREE (3) YEARS OTHER THAN PARKING VIOLATIONS | | | | | | | | |
| LOCATION | | DATE | CHARGE | | | | VIOLATION | |
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STATEMENT (Please read carefully before signing this application):

I understand that employment with Barcelona Equipment, Inc. is at-will, meaning that I or Barcelona Equipment, Inc. may terminate my employment at any time, or for any reason consistent with applicable state and federal law. I authorize Barcelona Equipment, Inc. to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release Barcelona Equipment and its representatives from any liability that might result from such investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that Barcelona Equipment, Inc. requires the successful completion of a drug and/or alcohol test as a condition of employment.

I understand that this application will be kept for a period of one year; after that time, if I wish to be considered for employment I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

| SIGNATURE OF APPLICANT | DATE SIGNED |
|------------------------|-------------|