

Employment History

Please read carefully before starting. List all employment starting with the present or most recent employer. Account for all periods, including unemployment and service with the Armed Forces. Also include relevant voluntary and/or part-time work experience. If you need more space, add a separate page.

		Dates			
NAME OF EMPLOYER Current/Previous Employer (Circle One)		From (Month/Year)		To (Month/Year)	
Name of Street		Starting Wage	\$	Ending Wage	\$
City	State				
Job Title		Describe Major Duties			
Department					
Supervisor/Mgr. Name & Title		Reason for Leaving			
Telephone #					
If this is your current employer, may we contact? (Circle) Yes No					
		Dates			
NAME OF EMPLOYER Current/Previous Employer (Circle One)		From (Month/Year)		To (Month/Year)	
Name of Street		Starting Wage	\$	Ending Wage	\$
City	State				
Job Title		Describe Major Duties			
Department					
Supervisor/Mgr. Name & Title		Reason for Leaving			
Telephone #					
		Dates			
NAME OF EMPLOYER Current/Previous Employer (Circle One)		From (Month/Year)		To (Month/Year)	
Name of Street		Starting Wage	\$	Ending Wage	\$
City	State				
Job Title		Describe Major Duties			
Department					
Supervisor/Mgr. Name & Title		Reason for Leaving			
Telephone #					
		Dates			
NAME OF EMPLOYER Current/Previous Employer (Circle One)		From (Month/Year)		To (Month/Year)	
Name of Street		Starting Wage	\$	Ending Wage	\$
City	State				
Job Title		Describe Major Duties			
Department					
Supervisor/Mgr. Name & Title		Reason for Leaving			
Telephone #					

Applicant Release and Acknowledgement

I understand that Bradley (hereinafter referred to as the Company) requires certain information about me to evaluate my qualifications for employment and to conduct its business if I become an employee. Therefore, I authorize the Company to investigate my past employment, educational credentials, and other employment-related activities. I agree to cooperate in such investigations and release those parties supplying such information to the Company from all liability or responsibility with respect to information supplies.

I agree that the Company may use the information it obtains concerning me in the conduct of its business. I understand that such use may include disclosure outside the Company in those cases where its agents and contractors need such information to perform their functions, where their company's legal interests and/or obligations are involved, or where there is a medical emergency involving me. I understand, however that the Company intends to protect the confidentiality of personal information it obtains concerning me to the extent required by law.

I agree that I will not disclose or use while interviewing with or employed with Bradley any confidential or proprietary information of others, including any former employer.

I understand that any employment with the Company would not be for any fixed period of time and that, if employed, I may resign at any time, for any reason, or the Company may terminate my employment at any time for any reason in the absence of a specific written agreement to the contrary. I understand that my employment-at-will status may not be modified or changed except in writing and signed by a duly authorized officer of the Company.

I understand that any false answers or statements made by em on this application, any supplement thereto or in connection with the above-mentioned investigations, may be grounds for refusal of employment, invalidate my employment or, if employed, will be sufficient grounds for immediate discharge and render me ineligible for any Company benefits.

My signature below acknowledges that I have read, understand, and agree to the terms of the entire application.

Name (Please Print) _____

Applicant's Signature _____ Date _____

NOTICE REGARDING BACKGROUND INVESTIGATION

You are being considered for employment by Bradley (the "Company"). We would like to investigate the information which you have provided to us, and other relevant background information, in connection with your application for employment to determine whether you are a suitable candidate. The law requires us to provide you with notice and information about these background checks.

For purposes of employment with Bradley, we typically verify: 1) your criminal history; 2) your educational background; and 3) your past employment. In addition, we may check your driving record, if necessary, as determined by Bradley. Should you decline to authorize a background investigation, your employment application will be deemed withdrawn.

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

I acknowledge that I have received a copy of the NOTICE REGARDING BACKGROUND INVESTIGATION, and that I have read and understood that notice.

I hereby give the Company permission to obtain background information to be used for employment purposes at any time during the application process and, if I am hired, throughout the tenure of my employment.

Name (please print): _____

Social Security Number: _____

Signature: _____

Date: _____

Convictions/Suspensions/Debarments

Have you ever been convicted of a felony? (include all pleas of "guilty" or "no contest") * Yes No
 (For Washington applicants, consider conviction or release from imprisonment, whichever is most recent, within last seven years.) (Please Check One)

Have you ever been convicted of or imprisoned for a misdemeanor committed within the last seven years? * Yes No
 (Please Check One)

(For Massachusetts applicants, include only convictions and completed periods of incarceration within the last five years and exclude first offense for drunkenness, simple assault, speeding, a minor traffic violation, an affray or disturbing the peace. For Washington applicants, consider conviction or release from imprisonment, whichever is more recent, within last seven years. For California applicants, exclude information regarding (1) convictions of marijuana offenses in violation of California Health and Safety Code Sections 11357(b) or (c) or a statutory predecessor thereof, 1136(c) [now (b)], 11364, 11365, or 1150, as they related to marijuana prior to January 1, 1976, or a statutory predecessor thereof, which are more than two years old; and (2) any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed pursuant to California Penal Code Section 1203.4)

*Note: Hawaii applicants: Do not answer either of the above two questions. Applicants in Arkansas, California, Colorado, Delaware, Illinois, Maryland, Massachusetts, Ohio, Oklahoma, Oregon, Rhode Island, Utah and Virginia need not disclose information pertaining to sealed or expunged conviction records.

Are you currently debarred, suspended or otherwise ineligible to work on any federally funded program? Yes No
 (Please Check One)

If **Yes** to any of the above questions, please explain fully. **This information will not necessarily bar an applicant from employment and, therefore, any uncertainty should be resolved in favor of disclosure. The nature and seriousness of the crime and date of conviction will be considered.**

Additional Information

State any additional information you feel may be helpful to us in considering your application. This could include any specialized training or courses you have completed that will aid in evaluating your qualifications for the position you are seeking. (Example: If applying for a clerical position, note training such as word processing, typing, calculator, computer, hardware, software, etc.) Please include grade or other indicator of achievement, such as words per minute typed. You should feel free to attach a resume.

How Were You Referred to This Job

(Please select one)

- | | |
|--|---|
| <input type="checkbox"/> Internal | <input type="checkbox"/> Bradley Web |
| <input type="checkbox"/> Referral _____ | <input type="checkbox"/> Milwaukeejobs.com |
| <input type="checkbox"/> Print Ad _____ | <input type="checkbox"/> Jobnet |
| <input type="checkbox"/> Recruiter _____ | <input type="checkbox"/> Monster/Career Builder |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other Website |

REFERENCE LIST

Applicant Name: _____

Company Requesting References: _____

LIST ONLY COWORKER OR SUPERVISORY REFERENCES. DO NOT LIST PERSONAL REFERENCES.

Name/Title: _____

Company: _____

Address: _____

Day Phone #: _____

Evening Phone #: _____

Work Relationship to Reference: _____

Name/Title: _____

Company: _____

Address: _____

Day Phone #: _____

Evening Phone #: _____

Work Relationship to Reference: _____

Name/Title: _____

Company: _____

Address: _____

Day Phone #: _____

Evening Phone #: _____

Work Relationship to Reference: _____

Name/Title: _____

Company: _____

Address: _____

Day Phone #: _____

Evening Phone #: _____

Work Relationship to Reference: _____

Equal Employment Opportunity Voluntary Applicant Self-Identification Form

Applicant Name: _____ Position Applied for: _____ Date: _____

The Bradley Corporation is an equal opportunity employer and does not discriminate in hiring or employment on the basis of race, color, religion, gender, national origin, age, disability, or any other prohibited federal, state, or local law. No information on this form is intended to secure information to be used for any such discrimination.

The Bradley Corporation is required by federal regulations to report information as requested below. Your contribution of this information is completely voluntary. The information you provide is strictly confidential and will be maintained separate from your application. You may inform us of your desire to benefit under the program at this time and/or at anytime in the future.

1) What is your gender: Male Female

2) Are you Hispanic or Latino*? Yes No

* A person of Cuban, Mexican, Puerto Rico, South or Central American, or other Spanish culture or origin regardless of race.

3) If your answer to question 2 is no, please identify your race. **Indicate the appropriate race group(s)** – check ALL that apply (response not required if identified as Hispanic/Latino above):

White Asian Native Hawaiian/Pacific Islander
 Black/African American American Indian/Alaskan Native

To Vietnam Era Veterans, other Eligible Veterans, Special Disabled Veterans, and Individuals with Disabilities

Government Contractors/subcontractors subject to the Vietnam Era Veterans Readjustment Act of 1974 and the Rehabilitation Act of 1973 are required to take affirmative action to employ and advance in employment Vietnam era and other eligible veterans, qualified special disabled veterans, and qualified disabled individuals. Submission of this information is voluntary; refusal to provide it will not subject you to any adverse treatment. The information provided will be held in strictest confidence, will be maintained separate from your personnel file, and will not be used in a manner inconsistent with the Acts.

Yes No

Veteran of the Vietnam Era

A "Veteran of the Vietnam Era" is a person who served on active duty for more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged with other than a dishonorable discharge. Veterans meeting the above criteria who served in the Republic of Vietnam between February 28, 1961 and May 7, 1975 are also protected.

Yes No

Recently Separated Veteran

A "Recently Separated Veteran" is defined as a veteran who has been discharged or released from active duty within the past one-year period.

Yes No

Other Eligible Veteran

An "Other Eligible Veteran" is defined as a veteran who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized.

Yes No

Special Disabled Veteran

A "Special Disabled Veteran" is a person entitled to compensation under laws administered by the Department of Veteran Affairs for a disability at 30% or more, or rated at 10% or 20% in the case of a veteran who has been determined by the Department of Veteran Affairs to have a serious employment handicap, or a person whose discharge or release from active duty was for a service-connected disability

Yes No

Disabled Individual

A disabled individual is defined as an individual who has a mental, physical impairment that substantially limits one or more major life activities, has a record of such impairment, or who is perceived as having such impairment.

If you are an individual with a disability or a special disabled veteran, we would like to include you under the affirmative action program. It would assist us if you inform us of (1) any special methods, skills, and procedures which qualify you for the positions that you might not otherwise be able to do because of your disability so that you will be considered for any positions of that kind, and (2) the accommodations necessary to assist you in performing the job properly and safety, including special equipment, changes in the physical layout of the job, elimination of certain duties to the job, provision of personal assistance services, or other accommodations.

Race Identification For EEO and Affirmative Action

American Indian or Alaskan Native

A person having origins any of the original peoples of North and South American (including Central America), and who maintains tribal affiliation or community attachment.

Asian

A person having origins in any of the original peoples of the far East, Southeast Asia, or Indian subcontinent including, for example, Cambodia, China, India Japan, Korea, Malaysia, Pakistan, the Philippine Island, Thailand, or Vietnam.

Black/African American

A person having origins or the Black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black” or “African American.”

Hispanic or Latino (All Races)

A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin regardless of race.

Hispanic or Latino (White Races Only)

A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin regardless of race, and of the White race.

Hispanic or Latino (All Other Races)

A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture or origin, and of any race other than white.

Native Hawaiian or Other Pacific Islander

A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.