

Date of Application: _____
Application is good for 60 days from this date. Applicants still interested after 60 days must re-apply.

WIND ENERGY SERVICES

EMPLOYMENT APPLICATION

Wind Energy Services is an Equal Employment Opportunity Employer and, as such, does not discriminate in the terms and conditions of employment on the basis of race, age, color, sex, marital or familial status, religion, national origin, ancestry, citizenship, veterans status, disability, or any other legally recognized basis.

Print:

Last Name:	First Name:	Middle Name:	Social Security Number
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Address:

City	State	Zip	County
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Primary Telephone Number	Secondary Telephone Number
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So that we may verify the information which you have provided in this application, have you ever been known by any other name which might identify you on employment, education, military or other records? Please list the names and indicate the time period for which they applied.

Position Desired:	Date Available To Start:
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Have you ever worked for MFG Fiber Glass before? If yes, when? _____ YES NO

Are you at least 18 years of age? YES NO

Are you able to provide proof of your identity and right to work in the United States? YES NO

Did anyone refer you to MFG? _____ YES NO

May we contact your present or former employer? YES NO

Can you work overtime when required? YES NO

Are you willing and able to travel as the job requires? YES NO

What languages are you able to speak? _____

What languages are you able to read? _____

Have you ever been convicted of a felony crime? If yes, state location, date, and description. (A conviction will not necessarily disqualify you from employment.) A "conviction" includes a plea, verdict or finding of guilt regardless of whether sentence was imposed by the court. You must not list (1) convictions related to marijuana more than two years ago. (2) convictions which have been judicially sealed, expunged or statutorily eradicated, (3) misdemeanor convictions for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, and (4) any information concerning a referral to, and participation in, any pre-trial or post-trial diversion program.

EMPLOYMENT HISTORY

Start with Most Recent Job:

Name of Company: _____	Dates of Employment: From: (_____) To: (_____)
Address: _____	Position: _____
City, State, Zip: _____	Supervisor: _____
Phone No: _____	Salary _____ Salary Start: (_____) End: (_____)
Reason for Change: _____	

Name of Company: _____	Dates of Employment: From: (_____) To: (_____)
Address: _____	Position: _____
City, State, Zip: _____	Supervisor: _____
Phone No: _____	Salary _____ Salary Start: (_____) End: (_____)
Reason for Change: _____	

Name of Company: _____	Dates of Employment: From: (_____) To: (_____)
Address: _____	Position: _____
City, State, Zip: _____	Supervisor: _____
Phone No: _____	Salary _____ Salary Start: (_____) End: (_____)
Reason for Change: _____	

Name of Company: _____	Dates of Employment: From: (_____) To: (_____)
Address: _____	Position: _____
City, State, Zip: _____	Supervisor: _____
Phone No: _____	Salary _____ Salary Start: (_____) End: (_____)
Reason for Change: _____	

Please list any additional training, certificates or professional development you have pursued, starting with the most recent and working backwards. Note any licenses or certifications which would be relevant to the position for which you are applying.

EDUCATIONAL INFORMATION

SCHOOL	NAME and LOCATION	Last Year Completed	MAJOR	DEGREE RECEIVED
High School		1 2 3 4		
Trade/Other School		1 2 3 4		
College		1 2 3 4		
College		1 2 3 4		
Graduate		1 2 3 4		

Is there any other information about you which we should know to evaluate your candidacy for the position for which you are applying? (Exclude information which might indicate race, sex, color, age, national origin or any other protected classifications.)

REFERENCES

Name	Address	Phone	Years Known	Relationship
<hr/>	<hr/>	<hr/>	<hr/>	<hr/>
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IMPORTANT

There are several important aspects of employment with MFG which you should be aware of before completing this Application for Employment. Please initial each paragraph as you read it. If you have any questions regarding the information, please do not hesitate to ask the HR Manager for clarification.

_____ I expressly agree and understand that my employment, having no specified term, is based upon mutual consent and may be terminated at will, with or without cause or notice, by either party (MFG or me). I also understand that this at will aspect of my employment, which includes MFG's right to demote, transfer or otherwise discipline me with or without cause or notice, may not be changed, waived or modified, except in an individualized written agreement signed by both me and the designated representative of the Company.

_____ The Company maintains a drug-free workplace in accordance with its Drug and Alcohol Policy and Screening Program. As a condition of employment with the Company, and after an offer of employment has been extended to you, you must successfully complete a physical examination and a drug and alcohol screening test. In addition, the Company reserves the right to administer a physical examination or a drug or alcohol screening test to any and all employees at anytime during their employment, for cause as determined by the Company.

_____ The Company requires that you immediately notify the Company if you have been convicted of any crime while your job application is pending or, if hired, during your employment. Your failure to comply with this requirement may prevent your hire, or if hired may result in immediate termination of your employment by the Company.

_____ The Company may seek to verify the information you have provided in this Application for Employment. By signing below, you acknowledge your understanding that the Company, its parent, subsidiaries, affiliates and any of its (their) employees or

agents (collectively referred to as the Company) will require you to execute a stand-alone disclosure form authorizing and releasing the Company to contact the persons or organizations you have listed and to discuss your background with them.

_____ I understand that, if I become employed by the Company, I will be subject to and expected to comply with all the rules, regulations and procedures of the Company.

_____ I understand that the hiring process is not complete and I will not become an employee of the Company until I have reviewed, completed and executed various employment documents including, but not limited to, this Application, the Company's Employee Handbook and Employee Handbook Acknowledgment Form, Arbitration Agreement, Consent and Disclosure Regarding Procurement of Consumer Credit Report and for Investigative Consumer Report and an At-Will Employment and Confidentiality Agreement.

_____ I declare under penalty of perjury that all the information which I have provided on this Application for Employment or any resume or other documentation provided by me in connection with this Application for Employment is true and complete, and I understand that if any of the information is determined to be false, even if that determination is made years later, it will result in my immediate discharge from employment with the Company.

I understand and agree to the foregoing provisions.

Date: _____

Signature of Applicant: _____

VOLUNTARY SELF-IDENTIFICATION FORM

To enable MFG to meet government reporting regulations and maintain an Affirmative Action Plan, applicants are requested to complete this personal data sheet. Information will be used solely for government reporting purposes. It will not be used as selection criteria and will be treated as personal and confidential. Your voluntary cooperation will be appreciated. If you choose not to self-identify, you will not be subject to any adverse treatment. Federal regulations do require us, in instances where applicants choose not to self-identify, to maintain race and sex information on the basis of visual observation or personal knowledge.

Ethnic Category

_____ White
_____ Black / African American
_____ Hispanic / Latino
_____ Asian

_____ American Indian or Alaskan Native
_____ Native Hawaiian or Pacific Islander
_____ Two or More Races
_____ Other _____

Sex

_____ Male
_____ Female

I am a Veteran of the Vietnam Era who served more than 180 days of active military, naval, or air service, any part of which was during the period of August 5, 1964 through May 7, 1975 and who

_____ was discharged or released there from with other than a dishonorable discharge, or

_____ was discharged or released from active duty because of service connected disability.

I am a Special Disabled Veteran who is entitled to compensation (or who, but for receipt of military retirement pay would be entitled to compensation) under laws administered by the Veteran's Administration for a disability

_____ which is rated at thirty percent (30%) or more, or

_____ which is rated at ten or twenty percent (10% or 20%), but it has been determined, under section 1506 of Title 38, U.S.C., that I have a "serious employment handicap", or

_____ which is service-connected and caused me to be released from active duty.

I am a Qualified Disabled Individual who

_____ has a physical or mental impairment which substantially limits one or more of that person's activities, or

_____ has a record of such impairment, or

_____ is regarded as having such impairment, or

_____ is capable (qualified) of performing a particular job with reasonable accommodation to his/her disability.