

Dear Applicant:

Thank you for choosing **Workpoint, LLC**, a company based in **Maryland** that solely provides optical fiber and copper cable installation manpower services to companies, government and non-government organizations' facilities, institutions and other agencies. We contribute to our community by providing job opportunities to cable installers. Our system has evolved for over fourteen (14) years that consistently responds to the changes of times. We encourage you to join our labor pool in making a difference in the world of business and technology through cable installation. In our goal to ensure employee and client safety, we subject all considered applicants to the pre-employment screening. Collection of these documents, however, does not guarantee employment.

- Two (2) verifiable references
- Two (2) Valid Proof of Identification and Proof of Eligibility to Work in the United States such as the following:
 - Driver's License & Social Security Card
 - State ID (if not driving)
 - Social Security Card
 - Resident Alien Card (if applicable)
 - Work Permit issued by USCIS-DHS (if applicable)
- Current Licensure/Certification related to the job applied for (if applicable)
- Background Screening
- Orientation of Company Policies & Procedures – approximately 2-3 hours with no remuneration
- Minimum of six (6) months prior experience for the job applied for unless the **WorkPoint** client is willing to provide on the job training
- Own Reliable Transportation & home telephone number or cellular/mobile phone number
- Able to meet the following job requirements: Optical Fiber & Copper Cable Installation, Splice, Terminate, Test & Label, Lift Materials at approximately 50 lbs, Climb Ladders, Keep the working area clean and organized at all times, Observe Safety in & out of workplace including Universal Precautions, Observe Client & Company Confidentiality, Proficient in English Language (both oral & written)
- Able to provide own tools and safety gears: Hard Hat, Work Boots, Safety Glass, Safety Vest, Dust Mask, Sharpie and Pencil, Electrician's Scissors with Stripping Notches/Cable Scissors/Snips, 10-pc Screw Driver Set, Hammer, Electric Drill and Channel Lock

If you are unable to meet the above pre-employment requirements at this time, we would be pleased to have you back once you are able to.

If you believe you are able to comply with all of the above-mentioned requirements, kindly fill out the attached application form. Please do not leave any space blank. Write N/A if not applicable. In that way, we can process your application without delay.

WorkPoint does not guarantee full-time employment to any applicant. Employees are hired and retained on an as-needed basis only.

We look forward to have you as an employee of our organization.

Sincerely,
The Management & Staff
Workpoint, LLC
7520-A Pulaski Highway Rosedale, MD 21237
Phone 410.282.7912 Fax 443.288.7782
jobs@workpoint.co www.workpoint.co

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus that gather and sell information about your creditworthiness to creditors, employers, landlords, and other businesses. The FCRA gives you specific rights, which are summarized below. You may have additional rights under state law. For more information, go to www.ftc.gov/credit, or write to: Consumer Response Center, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580. **You must be told if information in your file has been used against you.** Anyone who uses information from a consumer reporting agency to deny your application for credit, insurance, or employment – or take another adverse action against you – must tell you and give you the name, address, and phone number of the agency that provided the information. **You can find out what is in your file.** At any time, you may request and obtain your report from a consumer reporting agency. You will be asked to provide proper identification, which may include your Social Security number. In many cases the report will be free. You are entitled to free reports if a person has taken adverse action against you because of information in a report; if you are the victim of identity theft; if you are the victim of fraud; if you are on public assistance; or if you are unemployed but expect to apply for employment within 60 days. In addition, you are entitled to one free report every twelve months from each of the nationwide credit bureaus and from some specialized consumer reporting agencies. See www.ftc.gov/credit for details about how to obtain your free report. **You have a right to know your credit score.** Credit scores are numerical summaries of a consumer's creditworthiness based on information from consumer reports. For a fee, you may get your credit score. For more information, click on www.ftc.gov/credit. In some mortgage transactions, you will get credit score information without charge. **You can dispute inaccurate information with the consumer reporting agency.** If you tell a consumer reporting agency that your file has inaccurate information, the agency must take certain steps to investigate unless your dispute is frivolous. For an explanation of dispute procedures, go to www.ftc.gov/credit. **Inaccurate information must be corrected or deleted.** A consumer reporting agency or furnisher must remove or correct information verified as inaccurate, usually within 30 days after you dispute it. However, a consumer reporting agency may continue to report negative data that it verifies as being accurate. **Outdated negative information may not be reported.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old. **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need as determined by the FCRA -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. **Identity theft victims and active duty military personnel have additional rights.** Victims of identity theft have new rights under the FCRA. Active-duty military personnel who are away from their regular duty station may file "active duty" alerts to help prevent identity theft. For more information, visit www.ftc.gov/credit. **Your consent is required for reports that are provided to employers.** A consumer reporting agency may not give out information about you to your employer, or potential employer, without your written consent. Blanket consent may be given at the time of employment or later. **You may choose to remove your name from consumer reporting agency lists for unsolicited credit and insurance offers.** These offers must include a toll-free phone number you can call if you choose to take your name and address off lists in the future. You may opt-out at the major credit bureaus by calling 1-800-XXXXXXX. **You may seek damages from violators.** If a consumer reporting agency, a user of consumer reports, or, in some cases, a furnisher of information to a consumer reporting agency violates the FCRA, you may sue them in state or federal court. The FCRA gives several federal agencies authority to enforce the FCRA:

TO COMPLAIN AND FOR INFORMATION: PLEASE CONTACT:

- Consumer reporting agencies, creditors and others not listed below
Federal Trade Commission Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4367 (Toll-Free)
- National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)
Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
- Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)
Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)
- Office of Thrift Supervision Consumer Programs Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)
- National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-518-6360
- State-chartered banks that are not members of the Federal Reserve System
Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 800-934-FDIC
- Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission
Department of Transportation Office of Financial Management Washington, DC 20590 202-366-1306
- Activities subject to the Packers and Stockyards Act, 1921 Department of Agriculture
Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051

AUTHORIZATION TO RELEASE RECORDS

I understand and agree that: The information supplied, was submitted by myself, and all information is true and correct, to the best of my knowledge. I understand that false or misleading information given in my application and/or interview(s) will be considered as cause of possible dismissal and/or discharge. I also understand that I am to abide by all rules and regulation of the company. The company has my authorization to thoroughly investigate my work and personal history. I understand that the information supplied by me, regarding my: Employment History, Education (including an authorization to release transcripts), Credit History, Criminal History, Medical and Professional Licensing, Motor Vehicle Record(s), Residence History, and References, will be utilized as part of the processing procedures. A background check will be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics, and mode of living. I will hold no person liable for giving or receiving information in this investigation. I hereby authorize **WorkPoint** to make thorough check of my past employment, education and activities. I also hereby **SentryLink LLC**, an agent of **Workpoint** to make a thorough check of my criminal background check.

I release from liability all persons, companies and corporation supplying that information. I release and indemnify **Workpoint** and **SentryLink, LLC** against any liability that might result from making such background checks. A copy of this form is as valid as the original.

X _____ X _____ X _____
Applicant's Signature **Applicant's Printed Name** **Date**

APPLICATION FOR EMPLOYMENT

I. Personal Information

Today's Date _____
 Last Name _____ (Sr., Jr., I, II, III, IV, ___)
 First Name _____
 Middle Name _____ Other Names/Aliases _____
 Date of Birth _____ Place of Birth (State & Country) _____
(for background check purposes only) *(for background check purposes only)*
 Social Security Number _____
 Work Permit Number _____ Expires _____
(if applicable)
 Resident Alien Number _____ Expires _____
(if applicable)

I. Address

Street Address _____
(P.O. Box is not acceptable)
 City _____ County _____
 State _____ Zip Code _____

II. Contact Information

Home Phone Number _____ Mobile Phone Number _____
 Facsimile Number _____ Website _____
 Email Address _____

IV. Position Information

What position are you applying for? _____
 When can you start following notification? _____
 What is your desired hourly rate? _____

V. Availability Please list your specific hours of availability each day:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

VI. Referral Source

How did you learn about **Workpoint**? _____
 Have you ever applied to **Workpoint**? Yes No
 Have you previously worked for **Workpoint**? Yes No
 If yes, when did you work for **Workpoint**? _____
 Who was your Supervisor at **Workpoint**? _____
 Why did you leave **Workpoint**? _____

VII. Educational Background Please provide your educational background information below:

EDUCATION	NAME & ADDRESS OF SCHOOL	DATE ATTENDED	DEGREE/CERTIFICATION
High School			
College/University			
Trade/Vocational			
Other			

If you like, you may indicate any other language/dialect that you speak _____

VIII. Considerations

What are your means of transportation? (Check the one that applies best to your current situation.)

- I take the bus
- My relative/s drive/s me
- I have a car registered and insured under my name
- Others (kindly specify) _____

Do you have any restrictions/limitations that we need to consider if employed with **WORKPOINT**?

Yes No

If yes, kindly specify _____

IX. Disclosure of Prior Arrest/s &/or Conviction/s

(Prior arrests & convictions do not bar you from any employment opportunity with **Workpoint**. However, failure to disclose of such may be detrimental to your application. Failure to disclose may also result to the future termination of employment with **Workpoint**.)

Have you ever been arrested or convicted of a felony? Yes No

If yes, kindly explain. _____

X. Other Information

Tell us more about yourself (likes, dislikes, hobbies, interests): _____

What skills do you have that would be useful in this line of work? _____

What do you want to want to learn or experience if employed with **Workpoint**? _____

XI. Employment History

Company #1 _____
(most current)

Phone Number _____ Fax Number _____

Your Supervisor _____

Your Start Date _____ Your End Date _____

Your Start Rate _____ Your End Rate _____

Your Position _____ May We Contact this Company? _____

Reason for Leaving _____

Company #2 _____

Phone Number _____ Fax Number _____

Your Supervisor _____

Your Start Date _____ Your End Date _____

Your Start Rate _____ Your End Rate _____

Your Position _____ May We Contact this Company? _____

Reason for Leaving _____

XII. Personal References

Name #1 _____ Years Acquainted _____

Address _____

Mobile Phone No. _____ Home Phone No. _____

Fax Number _____ Email Address _____

Name #2 _____ Years Acquainted _____

Address _____

Mobile Phone No. _____ Home Phone No. _____

Fax Number _____ Email Address _____

XIII. Emergency Contact Information

Name #1 _____ Relationship _____
Mobile Phone No. _____ Home Phone No. _____

Name #2 _____ Relationship _____
Mobile Phone No. _____ Home Phone No. _____

Name #3 _____ Relationship _____
Mobile Phone No. _____ Home Phone No. _____

Workpoint, LLC is an equal opportunity employer. Workpoint makes all employment decisions, including those related to hiring, firing, training, promotion, pay and benefits without regard to gender, race, color, age, political opinion, political affiliation marital status, pregnancy, national origin or ancestry, religion of faith, citizenship, sexual orientation, gender identity, physical or mental disability, military or veteran status or any other basis prohibited by law. No information requested on this application is intended to be used for such discrimination. This policy applies to our Directors, Employees, Applicants, Customers including Vendors and Suppliers. Workpoint embraces diversity and equal employment opportunity that is free from harassment and discrimination. The applicant, whose signature appears below, attests that he/she has not been discriminated for any reason by the management and staff of Workpoint.

Also, the applicant voluntarily gives Workpoint the authority to make a thorough investigation of his/her past and present employment, contracting and sub-contracting services and activities. A fingerprint record, consumer report or an investigative consumer report may be requested that may also include information as to his/her character, work habits, performance and experience along with reasons for termination of past employment. The applicant understands that as directed by company policy and consistent with the job described, Workpoint may be requesting information from public and private sources about his/her workers' compensation injuries, driving record, court record, education, credentials, credit and references. The applicant also acknowledges that a telephonic facsimile (FAX) or photographic copy shall be valid as the original. This release is valid for most federal, state and county agencies including the Maryland Department of Labor.

In addition, he/she is willing to submit to drug testing to detect the use of illegal drugs prior to and during employment. The undersigned also agrees to cooperate in such investigation and release from any liability or responsibility all persons and companies or corporations supplying such information. He/she understands that if considered for a position with Workpoint, such may be contingent on the completion of the pre-screening requirements such as the following: satisfactory evidence of identity as outlined on Form I-9 of the Department of Homeland Security, background screening, orientation and/or drug screening test.

Under the Maryland Law, an employer may not require or demand, as a condition of employment, prospective employment or continued employment, that an individual submit to or take a lie detector or similar test. An employer who violates this law is guilty of misdemeanor and subject to a fine not exceeding \$100.

I understand that filling out this application does not guarantee my employment. I also understand that WorkPoint is a temporary staffing agency wherein my employment is on an as-needed basis only. I am fully aware that I am not guaranteed a full-time job.

X _____ X _____ X _____
Applicant's Signature Applicant's Printed Name Date

