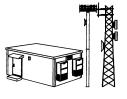
Reaching New Heights In Communications



APPLICATION FOR EMPLOYMENT

Date					
How did you hear about the Sign Job News		ne Referral Name: _	Other		
Have you submitted an ap	plication with RTS, Inc	. previously? \(\subseteq NO \subseteq YE	ES- Date:		
NameFIR.	ST 1	MIDDLE	LAST		
Present Address					
	STREET	CITY	STATE	ZIP CODE	
Cell Phone #	Home Phone #	# E1	nail:		
Do you have <u>United States Citized</u> Are you at least 18 years old? <u>Note</u> : If hired, Federal law re	□YES □NO			□YES □NO ited States.	
1. Type of work applying	for:	nstruction Work 🔲 Othe	er		
2. Rate of pay expected	pe	er:	<u></u> year		
3. Will you be willing to w	ork overtime?	\square No			
4. Date you can start to wo	ork?				
		n extended period of time? s		S More	
6. Have you been convicte	ed of a felony?	ves No			
7. Are you currently emplo	oyed?				
	<u>IEXI</u>	<u>PIEIRIIIENCIE</u>			
8. Have you had a job wh	here <u>TOWER CONSTR</u>	EUCTION EXPERIENCE	was required?	$\square No$	
9. Have you had a job where <u>WELDING EXPERIENCE</u> was required? \(\subseteq Yes \subseteq No					
10. If Yes, are you a STATE CERTIFIED WELDER? No Yes A.W.S. Certified? No Yes, #					
11. Have you had a job wh	here <u>GENRAL BLUEP</u>	<u>RINT READING</u> was requ	uired?		
12. <u>If Yes</u> , can you read <u>V</u>	<u>VELDING SYMBOLS</u>	on blueprints? Yes]No		
13. When driving a vehicle	e are you able to use a g	CLUTCH AND SHIFT GE	EARS properly? Yes	□No	
(1) HEAVY DUTY LOC (1) 12" CRESCENT WI	KING TOOL BOX (1) ½" DE RENCH (1) NEEDLE NOSE	REQUIRED STARTER HA EEP SOCKET SET & RATCHET (EPLIERS (1) SCREW DRIVER S RS (1) 9" LEVEL (1) 25' TAPE N	(1) CHANNEL LOCK PLIERS SET (1) HACKSAW (1) UTII		



APPLICATION FOR EMPLOYMENT

<u>GIENIE</u>	<u>IRAIL QUESTIIOI</u>	<u> </u>	
15. Do you have any problems with us running	g a <u>CRIMINAL BACKGRO</u>	UND CHECK ON YO	OU? No Yes
16. Would you be willing to take random <u>DRU</u>	<u>'G & ALCOHOL TEST</u> ?	Yes No	
17. Do you have <u>VALID DRIVING LICENSE</u>	? \[\text{Yes} \text{No} \]	State of Ohio	Other State
18. Have you had a <u>DUI</u> on your <u>DRIVING R</u>	ECORD in the last 7 years?	□No □Yes	
19. Do you have any POINTS on your DRIVI	NG RECORD in last 5 years	? No Yes	
20. If Yes, how many? $\square 2 \square 4 \square 6$	□ 8 □ 10 □ 12	POINTS	
21. Would you be willing to work out of town f	for an <u>EXTENDED PERIO</u>	D OF TIME? (2 wks	or more)
22. Do you have any problems working a <u>10-H</u>	IOUR DAY OR MORE? [□No □Yes	
23. Do you have any problem WORKING WE	EKENDS? No Yes		
23. Do you have any problem WORKING WE 24. Do you have reliable transportation?			
24. Do you have reliable transportation?	Ves No	STAY	
24. Do you have reliable transportation? QUESTIONS FO	Ves No DR OVERNIGHT		
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING	Ves No OR OVERNIGHT OUT OF TOWN OVERNI	GHT? □No □Yes	_
24. Do you have reliable transportation? <u>QUESTIONS</u> FO	Ves No OR OVERNIGHT OUT OF TOWN OVERNI	GHT? □No □Yes	_
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING	Ves No OR OVERNIGHT OUT OF TOWN OVERNI	GHT? □No □Yes	_
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING	Ves No OR OVERNIGHT OUT OF TOWN OVERNIGHT GA MOTEL ROOM with a j	GHT? □No □Yes	No Yes
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING 26. Do you have any problems with SHARING Name of School	Ves No DR OVERNIGHT OUT OF TOWN OVERNIG GA MOTEL ROOM with a j EDUCATION Graduate?	GHT?	No □Yes G.P.A.
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING 26. Do you have any problems with SHARING Name of School High School	Ves No OR OVERNIGHT OUT OF TOWN OVERNIG SA MOTEL ROOM with a p EDUCATION Graduate? Yes No	GHT?	No Yes G.P.A.
24. Do you have reliable transportation? QUESTIONS FO 25. Do you have any problems with STAYING 26. Do you have any problems with SHARING	OR OVERNIGHT OUT OF TOWN OVERNIG GA MOTEL ROOM with a p EDUCATION Graduate? Yes \[No \]	GHT?	G.P.A.

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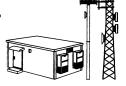


Rinehart Tower Service Inc. does not require C.D.L. license at this time. U.S. Department of Transportation does not require C.D.L. license when the company vehicles and trailers are under the weight limit of 26,000 pound. But, the U.S. Department of Transportation does consider our drivers as commercial drivers and will require you to take and successfully pass a physical and provide proof with a 'Medical Examiner's Certificate'. Federal law requires commercial drivers holders to receive periodic physical examinations, called a "Department of Transportation Medical Examination", to ensure the ability of the driver to safely operate a commercial vehicle. Tower companies and commercial drivers typically refer to the 'Medical Examiner's Certificate' as a 'DOT medical card'. Please review all the physical requirements defined by the US Department of Transportation:

A. Do you have 20/40 correctable vision in each eye?
☐ Yes ☐ Yes with Glasses or contact lenses ☐ No
B. Are you a diabetic? \(\sum No \subseteq Yes \)
Yes with diabetes controlled through a diet or oral medication. Yes on needle-injected insulin
C. Is your blood pressure under 160/100 (considered normal)?
Yes No Do you use prescription medication to control your blood pressure.
D. Is your blood sugar level under 200 (considered normal)?
Yes No Yes with Prescription medication to control blood sugar level
E. Are you using any amphetamine, narcotic or any other habit forming drug?
No Yes Yes with Doctor's Supervision
F. Do you have a current diagnosis of cardiac insufficiency, collapse, congestive cardiac failure or any other cardiovascular disease? No Yes
G. Other factors or conditions which could prevent you from obtaining the required DOT clearance include: sleep apnea, recent back injury, recent major surgery, a current hernia, or recent workmen's compensation claims. Do you have any of these conditions that might stop you from getting your D.O.T. physical? \(\subseteq No \subseteq Yes

If you have questions about your medical health, please consult your physician before beginning work. In conjunction with the DOT physical, Rinehart Tower Service Inc. is required to take random drug screens throughout the drivers & tower climbers' employment in the tower industry. The DOT drug screen will detect the usage of illegal narcotic drugs including marijuana, cocaine, amphetamines, opiates and phencyclidine (PCP). Rinehart Tower Service Inc. will provide you with a DOT physical and DOT drug screen which will be done before starting your first day at work.

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Employment History

Current or Last Compan	•	1	<u> </u>
	Dates of Employment from:	Pay rate upon leaving	Reason for leaving
Company Name	to	\$	
Address	Position	or	
City, State, Zip	1 OSITION	\$	
()	May we contact this employer?	or	
work telephone	Yes No	\$ \ \frac{\frac{1}{2}}{2} \ \text{Yr.}	
Second Last Company Yo	ou Worked For		
•	Dates of Employment from:	Pay rate upon leaving	Reason for leaving
Company Name	to	\$.	
Address	<i>iv</i>	or	
Address	Position	\$ □Wk.	
City, State, Zip	May we contact this ampleyor?	or	
work telephone	May we contact this employer? Yes No	\$	
application or any attachment sha and that if I am employed by RTS I understand that before I am hire examination and / or test. I also employment. I agree to take such I authorize RTS, Inc. to use its pe and financial record. I also autho any other person (s) contacted by	Forth on this application are true and coall be sufficient cause for dismissal. I S, Inc. I may be scheduled to work an ed, RTS, Inc may require me to understand that if I am hired, RTS, In the test. ersonnel or any investigative agency to brize all of my employers, references, or RTS, Inc. representatives to provide	understand that Rinehart Tower y time or day of that week, inclu go a physical examination and / c. may require me to undergo a o investigate my employment re- predit reporting agencies / burea RTS, Inc. with all records and in	aployed, any false statement or omission on this Service, Inc. is on call 24hours, 7 days a week ding holidays. or a drug or alcohol test. I agree to take such drug and / or alcohol test at any time during my cord, health, education, criminal conviction record us, medical facilities, educational institutions and information relevant to my employment application from such disclosures; and I waive any rights to
If I am hired into or later transfer arising out of or relating to the te termination of my employment at	rred or promoted to a non-bargaining armination of my employment under a nd for which I am eligible.	ny company arbitration policy a	any claim, controversy, dispute or complaint and / or procedure which exists at the time of the e same legal force and effect as the original