



QUANTUM3D

DOCUMENT NO.

012-0050-00

REVISION

03

DOCUMENT NAME

FORM, EMPLOYMENT APPLICATION

This document is confidential and proprietary to Quantum3D unauthorized use or copying without written consent is strictly prohibited.

Quantum3D is an Equal Opportunity Employer. Employment decisions are made without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability, veteran status or other characteristics protected by law. Quantum3D participates in E-Verify.

Position Applied for:

Desired Salary:

The information contained in this form will be treated as confidential

1. Personal Details

Last Name:		First Name:	
Telephone No:	Mobile No:	Email:	

2. General

PLEASE PROVIDE ALL OF THE FOLLOWING INFORMATION:	
Date Available for employment:	
Period of notice you have, or wish to give:	
Have you ever been granted a U.S. Government security clearance?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the clearance level and date granted:	_____ Date:_____
If not, to the best of your knowledge would you be able to qualify?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever had a clearance suspended or revoked?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you worked or attended school under a former name or alias? <i>If yes, please list former name/alias:</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>

3. Employment history

Please provide details of relevant jobs held including part time, temporary jobs, and please account for any break in employment history.

Please state most recent job first – up to 10 years maximum, unless you feel jobs beyond 10 years are relevant.

Dates				Name and Full Address of Company/Employer	Type of Business	Positions held (with dates)	Duties and Responsibilities	Reason for Leaving
From		To						
Month	Year	Month	Year					

4. References

Please list one personal and up to three professional references. A personal reference is someone who is neither a relative nor a former employer, and who has known you for at least three years. A professional reference is someone with whom you have had a business relationship, and whom you feel has significant knowledge of your work experience.

Name	Contact Information	Occupation	Relation	Years Known

5. Personal Development/Key Achievements

Please give full details of personal development and key achievements that you have undertaken and completed. This could be formal courses you may have attended, any forms of mentoring or coaching you have taken part in, membership of associations or professional groups. Additionally, note anything you feel relevant in this section.

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6. Background Check Authorization Form

Please read each paragraph carefully, sign and date below.

I voluntarily authorize Quantum3D and/or an investigative agency engaged by the company to conduct an investigation of me as a condition of my employment or continued employment at Quantum3D. I understand that the investigation of me may include obtaining information about my character, general reputation, professional qualifications and standing, mode of living and credit worthiness. The information will be used to make decisions about my employment, which may include hiring, firing, promotion or assignment.

The investigation will be conducted by an outside agency. However, I understand that the outside agency may obtain information it deems appropriate from various sources including, but not limited to, the following: credit reporting agencies, current and past employers, criminal conviction records, Department of Motor Vehicle records, military records, school records, and professional and personal references. I authorize, without reservation, any individual, corporation or other private or public entity to furnish the Company and the outside agency with this personal information.

By checking this box, I indicate that I wish to receive a free copy of the report.

I understand that I have the right to inspect the report at the investigative agency's offices during normal business hours and after reasonable notice to the agency. I can also inspect the report by certified mail or by telephone. I must show proper identification and pay for any costs involved with the inspection. I have the right to be accompanied by one other person who must also show proper identification. The investigative agency will explain any of the information in the report and will provide a written explanation of any coded information.

I understand that a "Summary of Your Rights Under the Fair Credit Reporting Act" is available for my review at <http://www.ftc.gov/bcp/online/edcams/fcra/summary.htm>.

This authorization and release, in original, faxed, photocopied or electronic form, will be valid for this and any future reports and updates that may be requested by the Company.

7. Declaration

By checking this box, I declare that the information I have given in this application is accurate and true. I understand that providing misleading or false information will disqualify me from employment OR, if hired, may result in my termination of employment.

EXPORT CONTROL COMPLIANCE QUESTIONNAIRE

Quantum3D works with technologies subject to U.S. export control regulations. Under these regulations it may be necessary for the company to obtain a U.S. government export license prior to releasing its technologies to certain persons. The decision whether or not to file or pursue an export license application is at the Company's sole election.

The following questions are being asked to assess your country of chargeability for export control screening purposes only. This information will not be used for any improper purpose.

1. ARE YOU ONE OF THE FOLLOWING:

- Citizen or National of the United States.
- U.S. Lawful Permanent Resident.
- Person granted Refugee status.
- Person granted Asylum.
- Temporary Resident (Granted under Amnesty or Special Agricultural Worker provisions. The term "Temporary Resident" does not include persons in non-immigrant status such as H-1B, J-1, L-1, F-1, etc.)

Yes **STOP.** Proceed directly to Signature Section below.

No Continue to Question 2.

2. HAVE YOU EVER ACQUIRED CITIZENSHIP, NATIONALITY, OR PERMANENT RESIDENT STATUS IN A COUNTRY OTHER THAN YOUR PLACE OF BIRTH?

Yes Please provide details (country(s), type of status, date of acquisition):

No Please state your country of birth:

3. HAVE YOU EVER RELINQUISHED, ABANDONED, OR LOST CITIZENSHIP, NATIONALITY OR PERMANENT RESIDENCE IN ANY COUNTRY, INCLUDING YOUR COUNTRY OF BIRTH?

Yes Please provide details (country(s), status relinquished/abandoned/lost, date of relinquishment/abandonment or loss):

No Proceed to Signature Section.

SIGNATURE SECTION

By checking this box, I understand that Quantum3D reserves the right to inquire further on any matter related to the company's export compliance obligations. I certify that the foregoing answers are true and correct to the best of my knowledge and belief.

EQUAL EMPLOYMENT OPPORTUNITY

Anti-Discrimination Notice: It is an unlawful employment practice for an employer to fail or refuse to hire or discharge any individual, or otherwise to discriminate against any individual with respect to that individual's terms and conditions of employment, because of such individual's race, color, religion, sex, or national origin.

Quantum3D is subject to certain non-discrimination and affirmative action recordkeeping and reporting requirements which require the employer to invite employees to voluntarily self-identify their race/ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable federal laws, executive orders, and regulations, including those which require the information to be summarized and reported to the Federal Government for civil rights enforcement purposes. If you choose not to self-identify at this time, the federal government requires this employer to determine this information by visual survey and/or other available information. For civil rights monitoring and enforcement purposes only, all information will be collected and reported in the categories identified below. The definitions for each category have been established by the federal government. If you choose to voluntarily self-identify, you may mark the appropriate boxes presented below.

Race/ethnicity Category:

Please mark the one box that describes the race/ethnicity category with which you primarily identify.

- White:** a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American:** a person having origins in any of the black racial groups of Africa.
- Asian:** a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Hispanic or Latino:** a person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- Native Hawaiian or Other Pacific Islander:** a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- American Indian or Alaska Native:** a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Two or More Races:** a person who primarily identifies with two or more of the above race/ethnicity categories.

VETERAN STATUS: Please mark the Veteran status category that best describes your situation. You may leave this blank if none apply or if you choose not to identify.

- Disabled Vietnam Era Veteran
- Vietnam Era Veteran (08/05/1964 – 05/07/1975)
- Disable Veteran (other than a Vietnam Era Veteran)
- Armed Forces Service Medal Veteran

Information about disability will help us to monitor not only the effectiveness of our Equal Opportunities Policy, but will also enable us to take practical steps to ensure the correct facilities are available during the selection process.

Do you have a disability? Yes No

Are you registered Disabled? Yes No

Do you have any special requirements when attending an interview, e.g., wheelchair access?