

| Applicant Informa | tion | | Date: | | | | | | | |
|--|----------------|------------------------|--|-------------------------------------|---------------------|----------------|---------|--|--|--|
| First Name: | Mide | dle Name: | | Last Name: | | | Suffix: | | | |
| Street Address: | <u> </u> | | Address 2: | | | | | | | |
| City: | City: State: | | Zip Code: | | Country: | | | | | |
| Social Security Number: | Cell Number: | | Home Nu | ımber: | | Email Address: | | | | |
| Date available to start? | Howr | | | How many hours can you work weekly? | | | | | | |
| Days available for work? | ∕lon Tue | es Wed | Thu | Eri | Sat S | un | | | | |
| Do you have a valid driver's license | | es vveu | Thu Fri Sat Sun Do you have reliable transportation to work? | | | | | | | |
| | | | Do you ii | averen | | | | | | |
| Yes | No | | | | Yes | No | | | | |
| State of Issue: | License Numl | ber: | Expiration | n Date: | | Date of Birth: | | | | |
| Have you previously worked at USI | NDT? | | If yes, ple | ease pro | ovide the dates: | | | | | |
| Yes | No | | | | | | | | | |
| Do you have relatives employed at | | | If ves. ple | ease pro | ovide the name & re | elationship: | | | | |
| Yes | No | | ,, p | | | | | | | |
| If you are under 18 and it is require | | nish a work nermit? | Are you a | citizon | of the U.S.? | | | | | |
| | • | iisii a work periiiit: | Are you a citizen of the U.S.? | | | | | | | |
| | lo N/A | | Yes No Have you ever been convicted of or pled no contest to any crime? | | | | | | | |
| Are you allowed to work in the U.S.A.? | | | Have you | l ever b | | | crime? | | | |
| Yes No If yes, please explain: | | | | | Yes | No | | | | |
| D. Gillian mana | | | | | | | | | | |
| Military | | | | | | | | | | |
| Have you served in the U.S. Armed | Forces? | | What is/was your current rank and/or grade? | | | | | | | |
| Yes | No | | What was/will be your date of separation? | | | | | | | |
| Are you currently a member of the | National Guard | d? | What is/was your current rank and/or grade? | | | | | | | |
| Yes No | | | What was/will be your date of separation? | | | | | | | |
| Education Informa | tion | | ' | | | | | | | |
| Name & Location of School Dates At | | | ded | | Subjects Taken | Degree Re | ceived | | | |
| | | From: | | | | | | | | |
| | | To: | | | | | | | | |
| | | From: | | | | | | | | |
| То: | | | | | | | | | | |
| | | From: | | | | | | | | |
| | | То: | | | | | | | | |
| | | From: | | | | | | | | |
| | | To: | | | | | | | | |
| | | From: | | | | | | | | |
| To: | | | | | | | | | | |



Technical/Vocational School

| Name & Location of Sch | nool Dates A | Subjects Tal | en Degree Received | | | |
|---|-----------------------------------|-------------------|--------------------|------------------------------|--|--|
| | From: | | , | | | |
| | To: | | | | | |
| | From: | | | | | |
| | То: | | | | | |
| | From: | | | | | |
| | То: | | | | | |
| | From: | | | | | |
| | То: | | | | | |
| Technical Certification | tions | | | | | |
| Please list all certifications, including | safety certifications. To be incl | uded, all must be | documented, and | a copy provided: | | |
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| Industrial Radiogra | <u> </u> | n Card | | | | |
| Do you have an IRRSP or state issued | | | | es No | | |
| Card No.: | State of Issue: | ation Date: | | | | |
| | | | | | | |
| Has your Radiography Card ever bee | n revoked or suspended? | | Y | es No | | |
| If yes, please explain: | | | | | | |
| | | | | | | |
| | | | | | | |
| Employment Histo | ry: Must list the | PAST SE | VEN YEA | ARS work history | | |
| Job 1 (Start with your most recent o | or current position. Please do n | ot indicate, "see | attached resume" | on this section) | | |
| Employer: | | | | Telephone: | | |
| | | | | | | |
| Street Address: | | | Apt. Number: | Dates Employed (Month/Year): | | |
| | | | | From: To: | | |
| City: | State/Territory: | Zip Code: | • | Hourly Rate/Salary: | | |
| | | | | Starting: Ending: | | |
| Name & Title of Supervisor: | Reason for Leaving: | | | | | |
| · | | | | | | |
| Position you held: | May we contact for reference: | | | | | |
| , | Yes No | | | | | |
| Describe your Job Duties (be specific | .). | | | 103 140 | | |
| bescribe your too buttes (be specific | ·1· | | | | | |
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| Job 2 (Please do not indicate, "see attached resume" on this section) | | | | | | | | |
|---|-----------------------------------|---------------------|--|--|--|--|--|--|
| Employer: | Telephone: | | | | | | | |
| Street Address: | | Apt. Number: | Dates Employed (Month/Year): From: To: | | | | | |
| City: State/Territory: Zip Code: | | | | Hourly Rate/Salary: | | | | |
| City. | State/ Territory. | zip code. | | | | | | |
| Name & Title of Supervisor: | | | | Starting: Ending: Reason for Leaving: | | | | |
| Name & Title of Supervisor. | | | | Reason for Leaving. | | | | |
| Position you held: | May we contact for reference: | | | | | | | |
| , | | | | Yes No | | | | |
| Describe your Job Duties (be specif | ic): | | | | | | | |
| Job 3 (Please do not indicate, "see | attached resume" on this section) | | | | | | | |
| Employer: | attached resume on this section, | | | Telephone: | | | | |
| | | | | , erspirens | | | | |
| Street Address: | | | Apt. Number: | Dates Employed (Month/Year): | | | | |
| | | | | From: To: | | | | |
| City: | State/Territory: | Zip Code: | • | Hourly Rate/Salary: | | | | |
| | | | | Starting: Ending: | | | | |
| Name & Title of Supervisor: | | Reason for Leaving: | | | | | | |
| Position you held: | | | | May we contact for reference: | | | | |
| | | | | Yes No | | | | |
| Describe your Job Duties (be specific): | | | | | | | | |
| | attached resume" on this section) | | | Talanhana | | | | |
| Employer: | | | | Telephone: | | | | |
| Street Address: | | | Apt. Number: | Dates Employed (Month/Year): | | | | |
| Street Address. | | | Apt. Number. | From: To: | | | | |
| City: | State/Territory: | Zip Code: | l | Hourly Rate/Salary: | | | | |
| , | · | | | Starting: Ending: | | | | |
| Name & Title of Supervisor: | Reason for Leaving: | | | | | | | |
| Position you held: | May we contact for reference: | | | | | | | |
| Describe your Job Duties (be specif | Yes No | | | | | | | |
| Describe your Job Duties (be specif | ю. | | | | | | | |



| For T&R purposes, any gap in employment that lasted longer than 3 months requires an explanation. Please provide if applicable. This does not disqualify you from employment. | | | | | | | | | |
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| Personal Reference | | | | | | | | | |
| Provide 3 personal references. References cannot be an immediate family member (spouse, child, parent, or anyone that resides in the same household). | | | | | | | | | |
| Name | Occupation | Years Known | Day-Time Phone Number | | | | | | |
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Applicant Statement

Statement Date:

I certify that the information provided in this employment application is true and complete to the best of my knowledge, and that I have not knowingly withheld any material information. I understand that providing false statements on this application, or any misrepresentation or failure to disclose material information shall be considered sufficient cause for disqualification from further consideration for hire or cause for dismissal whenever it is discovered after hired.

I authorize, without reservation, U.S. Inspection & NDT, LLC, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding U.S. Inspection & NDT, LLC, its agents, employees or representatives, for seeking, gathering and using information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that I am not to take any confidential, trade secret or proprietary information from any prior employer, and I confirm to U.S. Inspection & NDT, LLC that I have not done so or will not do so.

If I am hired, I understand that my employment relationship with U.S. Inspection & NDT, LLC is of an "at will" nature, I am free to resign at any time, with or without cause and without prior notice, and U.S. Inspection & NDT, LLC reserves the same right to terminate my employment at any time with or without cause or prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration.

I understand that no manager or representative of U.S. Inspection & NDT, LLC is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the forgoing express language are valid unless they are in writing and signed by the President & CEO of U.S. Inspection & NDT, LLC.

Print Name:

Signature:

Date:

AN EQUAL OPPORTUNITY EMPLOYER

U.S. Inspection & NDT, LLC is an Equal Opportunity Employer. Prospective employees will receive consideration without discrimination because of race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the U.S. Inspection & NDT, LLC Human Resources Department.

BY TYPING YOUR NAME ABOVE, YOU CERTIFY THAT YOU HAVE READ, UNDERSTAND AND AGREE TO THE ABOVE LEGAL STATEMENT AND THAT YOU HAVE READ THE COMPANY'S ONLINE PRIVACY POLICY AND AGREE TO BE BOUND BY ITS TERMS AND CONDITIONS.

By electronically signing this application, you certify that the information you have provided in this Application is true and complete. You understand that if hired, inaccurate, omitted, misrepresented or incomplete statements on your Job Application may result in your immediate disqualification from consideration of employment, or, if already hired, your immediate termination. You understand and agree that the Company, in considering your application for employment, may verify the information set forth on this application and obtain additional background information relating to your background. You authorize the Company to investigate the accuracy and completeness of all statements contained in this Application, and to obtain any transcripts, records, references, or documents pertaining to your background and business experience. You further authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to supply any information concerning your background to Company as relates to this application.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT



Authorization to Release Information

| Aut | horization to Release | Informa | ation | | | Date: | | | | |
|--|--|---|--|--|--|--|---|--|--|--|
| Position | Applied for: | | | | | | | | | |
| Prefix: | fix: First Name: | | | Name: | Last Name: | | Suffix: | | | |
| | | | | | | | | | | |
| Other n | ames used in the past: | | | Maiden Name: | | | • | | | |
| Date of Birth (mm/dd/yyyy): Social Securi | | Social Securit | urity Number: | | | Driver's License Number: | | | | |
| unders investig being fi During NDT, LI mainta employ I author authori I releas and shainforma I have r is valid | I understand that U.S. Inspection & NDT, LLC has a wide range of business including providing services to a variety of clients. I further understand that many positions require that employees hired by U.S. Inspection & NDT, LLC undergo one or more background investigations, including, but not limited to checking references, checking criminal convictions, checking motor vehicle records, and being fingerprinted. During the application process and at any time during any subsequent employment, I understand and agree that U.S. Inspection & NDT, LLC may request information from various federal, state and other agencies, including public and private sources which may maintain records concerning my past activities relating to my driving record, credit history, criminal record, civil matters, previous employment, educational background as well as other past experiences. I authorize the release of this information without restriction to U.S. Inspection & NDT, LLC, any Consumer Reporting Agency, their respective officers, agents or employees and to any client of U.S. Inspection & NDT, LLC to which I may be assigned. I further authorize U.S. Inspection & NDT, LLC to share the results of such investigation with the requesting client. I release U.S. Inspection & NDT, LLC, its clients, the consumer reporting agency and all of their respective agents, employee officers, and shareholders from any liability and responsibility for collecting, reviewing, disseminating and/or making decisions based on information obtained. I have read and understand the above. I acknowledge that a fax or copy of this release shall be as valid as the original. This release is valid for all private persons and entities, and federal, state, county and local agencies and authority. | | | | | | | | | |
| Print Na | me: | Signature: | | | | Date: | | | | |
| CONDITION By elect You un your in underst this ap investig | TING YOUR NAME ABOVE, YOU COMENT AND THAT YOU HAVE READ TOOMS. It onically signing this application, you derstand that if hired, inaccurate, on mediate disqualification from contain and agree that the Company, if plication and obtain additional baste the accuracy and completenes ces, or documents pertaining to you | the COMPANY ou certify that mitted, misrelansideration of the considering ackground information of all statems. | the information of the informati | mation yed or inco yment, co lication relating tained ir | ou have provious mplete staten or, if already for employmed to your back this Application. | ded in this Application is true and coments on your Job Application may hired, your immediate termination, may verify the information set ckground. You authorize the Comition, and to obtain any transcripts, | omplete. result in on. You forth on pany to records, | | | |

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE RELEASE STATEMENT

companies, corporations, credit bureaus, and law enforcement agencies to supply any information concerning your background to

the Company as it relates to this application.



Background Investigations

Consent Form for Background Investigations Date:

I authorize and grant my consent to my employer, **U.S. Inspection & NDT, LLC**, to request the U.S. Nuclear Regulatory Commission (NRC), under Section 652 of the Energy Policy Act of 2005, to request criminal record information about me from the U.S Attorney General, who will refer the request to the Federal Bureau of Investigation. I understand that the purpose of this information is solely to enable the company to determine my trustworthiness and reliability for unescorted access to a Category 2 or greater quantity of radioactive material as defined in the NRC's regulations, in Title 10 of the Code of Federal Regulations (10 CFR) Part 37, "Physical Protection of Category 1 and Category 2 Quantities of Radioactive Material." I understand that **U.S. Inspection & NDT, LLC** must obtain my signed consent before any investigation or reinvestigation to determine my trustworthiness and reliability for such unescorted access.

I authorize and grant my consent to any authorized representative of **U.S. Inspection & NDT, LLC** who is conducting my background investigation or reinvestigation, as defined in 10 CFR 37.25, Background Investigations," to obtain any information related to my activities from individuals schools, residential management agents, previous employers, criminal justice agencies, or other sources of information. This information may include, but is not limited to, my academic residential, achievement, or performance information and information about my attendance disciplinary, employment, and criminal history records. I authorize the Federal Bureau of Investigation to disclose the record of my criminal history background investigation to my employer for the purpose of making a determination of my trustworthiness and reliability for unescorted access to a Category 2 or greater quantity of radioactive material. I understand that before making any determination to deny me this unescorted access, **U.S. Inspection & NDT, LLC** will provide me a copy of the information on which it intends to base that determination. I further understand that before a final adverse determination, my employer must give me an opportunity to correct any inaccurate or incomplete information that is developed during the background investigation.

I understand that I may withdraw my consent at any time and that after I do withdraw my consent, under 10 CFR 37.23(c) of the NRC's regulations, **U.S. Inspection & NDT, LLC** may not initiate any elements of the background investigation that were not in progress at the time that I withdrew my consent. I also understand that, under 10 CFR 37.23(c), the withdrawal of my consent for the background investigation is sufficient cause for denial or termination of any authorization for unescorted access.

I understand that, for previous employers and other sources of information, separate specific releases may be needed and that I may be contacted for such releases at a later date. I authorize custodians of records and other sources of information pertaining to me to release such information upon request of the investigator or other duly authorized representative of the company regardless of any previous agreement to the contrary.

I understand that the information released by records custodians and other sources of information is solely for the purpose of making a determination about my trustworthiness and reliability for unescorted access to the radioactive materials subject to 10 CFR Part 37 and that this information may be disclosed only as authorized by State or Federal law.

I understand that photocopies of this authorization and consent document with my signature are valid and that this authorization will remain in effect as long as I am authorized to obtain unescorted access to the radioactive material subject to 10 CFR Part 37.

| Full Name: | Signatur | e: | Date S | Signed: | | |
|-------------------------------|-----------|----------------|--------|----------|-----------|---------------|
| Other Names Used: | Date of E | Birth: | Social | Security | Number: | |
| Current Address & Apt Number: | | City & County: | | State: | Zip Code: | Phone Number: |