

I. CERTIFICATION OF TRUTHFULNESS

I CERTIFY THAT all of the information furnished on the Application is true, complete and correct. I understand and agree that any falsification, misrepresentation or omission of fact either on this Application or during the pre-hire process will be reason for (1) my not being offered employment or (2) dismissal at any time from the service of Bekins, Inc. (hereinafter referred to as Company or Employer), if employed.

II. EMPLOYMENT AT WILL

I understand and agree that my employment and compensation are for no definite period and may, regardless of the time and manner of payment of my wages and salary, be terminated at any time by me or the Company, with or without cause, and without any previous notice. I also understand and agree that the Company has the right to unilaterally modify and/or terminate any policies, practices, procedures and standards it has adopted or implemented, to the extent not limited by law. I acknowledge that no company employee nor representative, other than its President/C.E.O. , has either the power or authority to enter into any agreement for employment for any specified period of time, or to make any representations or agreements contrary to any of the foregoing, unless that agreement is in writing and signed by the President/C.E.O. of the Company. I further understand that any prior representations, promises, contracts or statements made by or on behalf of the Company are expressly superseded by the foregoing.

III. AUTHORIZATION TO WORK

The Immigration Reform and Control Act of 1986 states that employers must require all persons hired to submit documents to the employer showing their identity and their right to be lawfully employed in the United States. It also requires that the employee complete and sign a government form to this effect. If you are hired you will need to furnish documents for inspection that verify your identity and indicate that you are legally permitted to work in the United States. Documents that are acceptable include, but are not limited to, your driver's license or state issued I.D., and your Social Security card or birth certificate. These documents must be provided within three (3) working days of employment.

IV. AUTHORIZATION FOR EMPLOYMENT/EDUCATIONAL INFORMATION

A. Authorization for Employment Information:

I authorize the references listed in this Application for Employment, and any prior employer, educational institution, or any other persons or organizations to give the Company any and all information concerning my previous employment/educational accomplishments, disciplinary information or any other pertinent information, personal or otherwise, they may have. I release all parties from all liability for any damage that may result from furnishing same to you. I hereby waive written notice that employment information is being provided by any person or organization.

B. Arbitration and Limitation Claims:

I agree that any action, claim, or lawsuit against the Company arising out of my application for employment, term of employment, or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be submitted to arbitration and that **I am waiving my right to assert any claim in court**. Arbitration shall be conducted in accordance with the rules and procedures set forth in the American Arbitration Association's National Rules for the Resolution of Employment Disputes. Once a decision is rendered by the arbitrator, judgment in a Michigan court of law shall be entered in accordance with that decision.

Additionally, I agree that any claim, action, or lawsuit against the Company and/or its agents arising out of my employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within the following time limits or be forever barred: (a) for suits or legal actions requiring a Notice of Rights to Sue from EEOC, within 90 days after the EEOC issues that Notice; or (b) for all other suits or legal actions, within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. **I waive any statute of limitations that exceeds this time limit.**

C. Criminal Records Check:

I agree to execute any authorization for the Company to secure my criminal conviction history from the appropriate law enforcement agency, should the Company determine it is necessary to do so.

D. Driving Records Check:

If applying for a position that requires driving a company vehicle, I authorize the Company and its agents to make investigations and inquiries of my driving record. I agree to execute an authorization for this employer to inquire into and obtain documents related to any driving record from every state in which I have held a motor vehicle operator's license or permit.

E. Release of Medical Information:

I authorize every medical doctor, physician, or other health care provider to provide any and all information, including but not limited to, all medical records, laboratory reports, X-rays, or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test, or evaluation. I hereby release every medical doctor, health care personnel and every other person, firm, officer, corporation, association, organization, or institute which shall comply with the authorization or request made in this respect from any and all liability. I understand that this release will not be sent to my physician or other health care provider until a conditional job offer has been made.

V. CONSIDERATION FOR EMPLOYMENT

The needs of the Company may make the following conditions mandatory: overtime, shift work, a rotating work schedule, or a week other than Monday through Friday. By the signing of this application I accept these conditions of employment.

This application is current for only 6 months. At the conclusion of this time, if I have not heard from the Company and still wish to be considered for employment, it will be necessary to fill out a new application.

I have read and understand items 1-5 above, and acknowledge this is my signature below. I agree that if any of the above commitments is ever found to be legally unenforceable as written, the particular commitments concerned shall be limited to allow its enforcement as far as legally possible.

Signature of Applicant:

Date:
