

Please complete this form tegibly and in ink. Failure to do this will result in delay and possible rejection.

GENERAL	L INFO	RMATI	ON			6			
				OYED BY MOTOR COMPONENTS, LLC	DR A SUBSIDIARY	?			
YES [YES NO IF YES, COMPANY NAME					FROM WHEN		TO WHEN	
NAME (LAST, FIRST, MIDDLE)							SOCIAL SECURITY NUMBER		
PRESENT AD	DRESS							<u> </u>	
TELEPHONE	TELEPHONE NUMBER					HOW LONG HAVE YOU LIVED AT YOUR PRESENT ADDRESS?			
_())								
ARE YOU LEG	BALLY E	NTITLE	TO REM	IAIN AND WORK IN THE UNITED STATE	S?				
YES [_ NO	IF NO,	EXPLAIN	IN DETAIL					
HAVE YOU BEI	?							IT, AND CRIMINAL RECORDS AS FURNISHED IN THIS	
	. <u> </u>	/ES [⊒ NO	IF YES, GIVE NAME(S) AND IDENTIFY	RELATED SCHOOL	OL, EMPLOYER, OR CRIMINA	L CONVIC	CTION	
-									
NAME RELAT	IVES EN	IPLOYE	о ву мо	FOR COMPONENTS, LLC					
EDUCATION	ON								
		igh sch	ool, trade	school, business school, college an	d any other educ	ational institution you have	attended		
List only de	egrees	you acti	ally rece	lived and grade or years you success	sfully completed.	, , , , , , , , , , , , , , , , , , ,			
SCHOOL/	LEVEL	DIPLOMA/CERTIF. DEGREE REC'D		MA IOD		MINOR	MINOR	SCHOOL NAME /	
LEVEL	CODE	YES	NO	MAJOR		MINOR		CITY / STATE	
Less than High School	01	Last gra complet							
High School	05								
Vocational	55				12.				
Technical	57								
Business	59					· ··			
Other	*								
COLLEGE IN	IFORM	ATION	ONLY Y	ou may be required to submit copies of	transcripts, diplom	nas or certificates to verify this	s informat	ion.	
	*	1							
Graduate		- 1							
Under- Graduate	*								
Graduate	*								
	*				1				

- 07 One year or less college
- 09 Two years college 11 Three years college
- 13 Four years and no degree
- 15 Associate's Degree
- 17 Associate of Arts
- 19 Associate of Business
- 21 Associate of Science
- 23 Bachelor's Degree
- 25 Bachelor of Arts
- 27 Bachelor of Business Admin,
- 29 Bachelor of Science
- 33 Post Baccalaureate
- 35 Master's Degree 37 Master of Arts
- 39 Master of Business Admin.
- 41 Master of Science
- 43 Master of Law
- 45 In Doctoral Program
- 47 Doctorate Degree
- 49 Doctor of Jurisprudence
- 51 Doctor of Law
- 53 Doctor of Philosophy
- 55 Vocational School Degree
- 57 Technical School Degree
- 59 Business School Degree

^{*} Please enter appropriate educational level code listed here

tarting with your most recen mployment. You should incli ither the resume or on this a	ide any military experience that	is relevant to the posi	ion for which you are applying. If yo	tes of employment and specific reasons for leaving each s u are attaching a resume, this information must be included		
OMPANY NAME		ADD	ADDRESS			
UPERVISOR'S NAME / JOB	TITLE		-	SUPERVISOR'S TELEPHONE		
ATE EMPLOYED FROM (IO/YR)	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE	REASON FOR LEAVING			
B TITLE AND DESCRIPTION	N (GIVE FULL DESCRIPTION O	F DUTIES, RESPONSI	BILITIES AND EQUIPMENT USED)			
DMPANY NAME		ADD	RESS			
IPERVISOR'S NAME / JOB	TITLE			SUPERVISOR'S TELEPHONE ()		
ATE EMPLOYED FROM IO/YR)	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE				
B TITLE AND DESCRIPTION	ON (GIVE FULL DESCRIPTION O	F DUTIES, RESPONSI	BILITIES AND EQUIPMENT USED)			
OMPANY NAME		ADD	RESS	· · · · · · · · · · · · · · · · · · ·		
JPERVISOR'S NAME / JOE	TITLE			SUPERVISOR'S TELEPHONE		
ATE EMPLOYED FROM 10/YR)	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE	REASON FOR LEAVING			
			BILITIES AND EQUIPMENT USED)			
OB TITLE AND DESCRIPTION	ON (GIVE FULL DESCRIPTION C	F DUTIES, RESPONSI				
DB TITLE AND DESCRIPTION	ON (GIVE FULL DESCRIPTION C	F DUTIES, RESPONS				
	ON (GIVE FULL DESCRIPTION C	·	RESS			
OMPANY NAME		·		SUPERVISOR'S TELEPHONE		
OMPANY NAME JPERVISOR'S NAME / JOE ATE EMPLOYED FROM		·		()		
DMPANY NAME JPERVISOR'S NAME / JOE ATE EMPLOYED FROM 10/YR)	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE	RESS	()		
OMPANY NAME UPERVISOR'S NAME / JOE ATE EMPLOYED FROM MO/YR)	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE	RESS REASON FOR LEAVING	()		
OMPANY NAME UPERVISOR'S NAME / JOE ATE EMPLOYED FROM MO/YR) DB TITLE AND DESCRIPTION	DATE EMPLOYED TO (MO/YR)	ENDING ANNUAL SALARY/WAGE	RESS REASON FOR LEAVING	()		
OMPANY NAME UPERVISOR'S NAME / JOE ATE EMPLOYED FROM AO/YR) OB TITLE AND DESCRIPTION OMPANY NAME	DATE EMPLOYED TO (MO/YR) ON (GIVE FULL DESCRIPTION C	ENDING ANNUAL SALARY/WAGE	RESS REASON FOR LEAVING	()		
OMPANY NAME UPERVISOR'S NAME / JOE NATE EMPLOYED FROM MO/YR)	DATE EMPLOYED TO (MO/YR) ON (GIVE FULL DESCRIPTION C	ENDING ANNUAL SALARY/WAGE	RESS REASON FOR LEAVING	SUPERVISOR'S TELEPHONE		

EMPLOYMENT REFERENCES Refer to people familiar with	your work performance or academic background.		
NAME		TELEPHONE NUMBER	3
		()	
ADDRESS			
COMPANY/POSITION			NUMBER OF YEARS ACQUAINTED
			TOTAL TEATER ACCOMMISE
NAME	i ·	TELEPHONE NUMBER	}
		_()	
ADDRESS			
COMPANY/POSITION			NUMBER OF YEARS ACQUAINTED
			MORDEN OF TEAMS ACCORDING
		-	
MILITARY SERVICE WERE YOU IN THE U.S. ARMED FORCES			
YERE TOO IN THE G.S. ARMED FORCES			
	TO RANK AT	SEPARATION	
BRIEFLY DESCRIBE YOUR DUTIES			
SKILLS ACQUIRED			
WORK PREFERENCE			
HOW DID YOU BECOME AWARE OF THIS OPENING?	SPECIFIC POSITION/JOB DESIRED		
LOCATION PREFERENCE	AMANUAL MARKET (CALLADY DECLETATION		1
LOCATION PREFERENCE	MINIMUM WAGE/SALARY REQUIREMENTS		DATE AVAILABLE TO START
TECHNICAL SKILLS Indicate experience or training with the equ	pipment or activities listed below, as applicable to the	position applied for.	
COMPUTER HARDWARE (List)			
		(+)	
COMPUTER SOFTWARE (List)			
OTHER (Please describe)			
UTHER (Please describe)			
OTHER INFORMATION			
OTHER INFORMATION MAY WE CONTACT YOUR PRESENT EMPLOYER FOR A REFERENCE?			
YES NO IF NO, WHY NOT			
WERE YOU EVER DISCHARGED OR REQUESTED TO RESIGN A POSITION	?		
YES NO IF YES, PLEASE EXPLAIN			
WHEN REQUIRED BY JOB, ARE YOU WILLING TO WORK OVERTIME AND	WEEKENDS?		
YES NO IF NO, WHY NOT			
WHEN REQUIRED BY JOB, ARE YOU WILLING TO WORK ANY SHIFT?			
YES NO IF NO, WHY NOT			
HAVE YOU EVER BEEN CONVICTED OF A FELONY?	_		
YES NO IF YES, INDICATE DATES, LOCATION AND D	osposition and nature of offense for	which you wer	e convicted.
Answering 'yes' to this question will not autom The Company will consider relevant factors conc making a determination on your application.	actically disquality you from cons	ideration for	employment.
making a determination on your application.	arme you conscious, as well a	s your other q	ualifications in
Motor Components, LLC is an equal opportunity employer. The C without regard to race, color, religion, sex, age, marital status, nat	ompany recruits, hires, trains and promotes int	o all iob levels the r	nost qualified applicants
Standards based on the individual's qualifications as they relate to	the particular ich vacancy and to the furthers	nce of court and illa	as by duncing objective

The Affirmative Action Plan for this facility is available for your review. Please indicate your desire to review the Plan to the Human Resources representative.

Read the material below carefully before signing.

APPLICANT'S STATEMENT AND AGREEMENT

I fully understand and agree that all statements made herein are subject to investigation and confirmation by Motor Components, LLC and that, if any such statement made by me is either a misrepresentation or false or misleading in any way, or if I have omitted any fact which makes this application false or misleading, such conduct shall constitute just and sufficient cause for refusal of employment or immediate discharge from employment at any time after discovery is made by Motor Components, LLC. I further understand that the foregoing conditions apply to information omitted from any resume which I have submitted.

In applying for employment, I understand that in the event I am offered a position with the Company, t may have to undergo a physical examination as a requirement of such employment and that my employment with the Company will be subject to the results of such physical examination. I understand that a urine screening test to determine the presence of certain drugs will be included in that physical examination. I further understand that a positive test of drugs may result in a rejection from further consideration for employment by Motor Components, LLC at this time. I also understand that if the drug screening test is positive, I will be confidentially notified of the results. I further understand in the event of a positive test result, or if I refuse to submit to the test, I may not be reconsidered for employment for a period of at least one year. I recognize any falsification, misstatement or evasion made by me in connection with my physical examination and medical history will subject me to discharge any time after the discovery, and I authorize such physical examination prior to or subsequent to my employment as may be requested by Motor Components, LLC.

I acknowledge that my signature on this application serves as my consent to the conduct of, and my promise to cooperate fully in, any security investigation which may be conducted by the Company. I understand that my refusal to cooperate with any such investigation shall constitute good and sufficient cause for the termination of my employment or withdrawal of this application from further consideration.

I hereby authorize any former employer, educational institutions, or other person or institution, to release the details of my former employment, education, or other history, including any documentary evidence thereof, to Motor Components, LLC. I hereby release any former employer, educational institutions, or other person or institution from any liability for furnishing such information to Motor Components, LLC.

I fully understand that all employees of a Company such as Motor Components, LLC are at all times to conform to the highest standards of honesty, integrity and security for the protection of the owners and customers of Motor Components, LLC. I agree to observe fully all company policies, practices and procedures currently in existence and new and revised ones, which may be issued in the future.

I hereby agree that should I be employed by Motor Components, LLC, either in the position applied for or in some other position now or hereafter, such employment may be terminated by Motor Components, LLC at any time, without liability to me for wages or salary, except such as may have been earned at the time of such termination.

Prior to any offer of employment, I agree to provide Motor Components, LLC documents as prescribed by the Immigration Reform and Control Act of 1986, which verifies my eligibility to be employed in the U.S.

SIGNATURE

DATE

APPLICANT'S INVENTION AND CONFIDENTIALITY AGREEMENT

In consideration of my employment, or the continuation of my employment by Motor Components, LLC (including any of its subsidiary and affiliated companies) hereinafter called "the Company" and the salary and wages to be paid to me, I agree:

- 1. I hereby irrevocably assign to the Company all of my right, title and interest in and to any and all Inventions and Works of Authorship made, generated or conceived by me during the period of my employment with the Company, and I agree to and shall disclose all such Inventions and Works of Authorship to the Company in writing. As used herein "Invention" means any discovery, Improvement, innovation, idea, formula, or shop right (whether or not patentable, whether or not put in writing, and whether or not put into practice) made, generated, or conceived by me (whether alone or with others) while employed by the Company. As used herein "Work of Authorship" means any original work of authorship within the purview of the copyright laws of the United States of America, and both the Company and I intend that all Works of Authorship created by me in the course of my employment with the Company will be works made for hire within the meaning and purview of such copyright laws.
- 2. I will execute and assign any and all applications, assignments, and other documents and will render all assistance which may be reasonably necessary for the Company to obtain patent, copyright, or any other form of intellectual property protection in all countries, and will, when requested, give testimony, all without any expense to me and all without further compensation to me.
- On a separate sheet hereof I have enumerated all inventions, together with a brief description thereof, which I have conceived prior to my employment by the Company, and which I specifically exclude from this Agreement.

- 4. I acknowledge that I may be furnished or may otherwise receive or have access to information which relates to the Company's past, present or future products, software, research, development, improvements, inventions, processes, techniques, designs or other technical data, or regarding administrative, management, financial, marketing or manufacturing activities of the Company or of a third party which provided proprietary information to the Company on a confidential basis. All such information, including any materials or documents containing such information, shall be considered by the Company as proprietary and confidential (the "Proprietary Information").
- 5. Both during and after the term of my employment with the Company, I agree to preserve and protect the confidentiality of the Proprietary Information and all physical forms thereof. In addition, I agree not to disclose or disseminate the Proprietary Information to any third party, including employees of the Company without a need to know, and I agree not to use the Proprietary Information for my own benefit or for the benefit of a third party. I agree that all Proprietary Information used or generated by me during the course of my working for the Company is the property of the Company. I agree to deliver to the Company all documents and other tangibles (including diskettes and other storage media) containing Proprietary Information upon the termination of my employment, for any reason, with the Company. The foregoing obligations shall not apply to any information which I can establish to have (i) become publicly known without breach of these obligations by me; (ii) been given to me by a third party who is not obligated to maintain confidentiality; or (iii) been developed by me prior to my employment with the Company, as established by documentary evidence.
- No change or modification of this Agreement, in whole or in part, shall be made except in writing and executed by me and an authorized officer of the Company.

This Agreement shall be legally binding upon me, my heirs and legal representatives and shall also be legally binding upon and inure to the Company, its successors and assigns.



Motor Components, LLC 2243 Corning Road Elmira, NY 14903

Since we are a federal contractor, we are required to solicit race and gender data on applicants for employment on a voluntary basis to support compliance with anti-discrimination regulations. Submitting the following information by email to hr@facet-purolator.com is completely **voluntary**, and the information which you provide will be kept confidential. You must click on Reply first in order to complete this form.

Thank you!							
Gender:		Male			Female	_	
Please indicate your ethnicity/race (each line represents one category for federal reporting purposes):							
1)	Americ	an Indian		OR	Alaska Native		
2)	Black_		OR Afr	ican An	nerican	_	
3)	Native	Hawaiian		OR	Other Pacific Isl	ander	
4)	Asian						
5)	Hispan	nic	OR	Latino			
6)	White _						
7)	Other_		(reported	as Unkr	nown for Federal	Reporting Requirements)	
Name	_			_		Date	

Motor Components, LLC is an equal opportunity employer. The Company recruits, hires, trains, and promotes into all job levels the most qualified applicants without regard to race, color, religion, sex, age, marital status, national origin, disability, or veteran status. All such decisions are made by utilizing objective standards based on the individual's qualifications as they relate to the particular job vacancy and to the furtherance of equal employment opportunity.