

APPLICATION FOR EMPLOYMENT

All statements made by applicants for employment on this application form will be carefully checked for accuracy. The use of this form does not mean there are positions open and does not obligate us in any way. This application will remain on active file for a period of one year from the date of the application.

Date _____

INSTRUCTIONS: Answer every question. **PRINT LEGIBLY!**

Name _____
Last First Middle

Present Address _____
No. Street City State Zip

How many years have you lived at this address? _____ Telephone # Home _____
For Messages _____

Jobs(s) applied for: 1. _____ Rate of pay required \$ _____ per _____
2. _____ Rate of pay required \$ _____ per _____

- Full Time Part Time Temporary
 Part Time Student Part Time Summer Only Part Time Seasonal

Have you worked for us before? No Yes If yes, when and where _____

If hired, do you have a reliable means of transportation to get to work? Yes No

Do you have a valid Driver's License ? Yes No

List any friends or relatives working for us _____

Do you feel you can perform the job applied for with or without reasonable accommodations?
 Yes No

Have you ever been discharged or asked to resign? No Yes If yes, explain _____

Have you ever been refused bond by an employer? No Yes

Have there ever been shortages or misunderstandings about merchandise or funds at a place of employment which involved you? No Yes If yes, explain in full _____

Are you or were you in the U.S. Armed Forces? No Yes If yes, what branch? _____

List duties in the service, including special training _____

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Circle highest grade completed: Highschool: 5 6 7 8 9 10 11 12 Name _____ Address _____ City _____ State _____ Graduated: <input type="checkbox"/> No <input type="checkbox"/> Yes Course of study _____ Grades: <input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average If NOT a high school graduate, do you have an equivalency diploma? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>College: 1 2 3 4 5 6 Name _____ Address _____ City _____ State _____ Graduated: <input type="checkbox"/> No <input type="checkbox"/> Yes Course of Study _____ Grades: <input type="checkbox"/> Above Average <input type="checkbox"/> Average <input type="checkbox"/> Below Average What special vocational or business courses have have you taken? _____</p> |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Indicate below job skills you have acquired & equipment you can operate. Include time spent in each area.

| Skills | How Much Time | Skills | How Much Time | Equipment | How Much Time | Equipment | How Much Time |
|--------------------------------------------------------|---------------|--------------------------------------------|---------------|----------------------------------------|---------------|-----------------------------------------|---------------|
| Mechanical <input type="checkbox"/> | | Customer Service <input type="checkbox"/> | | Log Loader <input type="checkbox"/> | | Radial Arm Saw <input type="checkbox"/> | |
| Electrical <input type="checkbox"/> | | Dispatching <input type="checkbox"/> | | Wheel Loader <input type="checkbox"/> | | Component Saws <input type="checkbox"/> | |
| Building Construction <input type="checkbox"/> | | Truck Maintenance <input type="checkbox"/> | | Cutting Torch <input type="checkbox"/> | | Arc Welder <input type="checkbox"/> | |
| Plumbing <input type="checkbox"/> | | Drafting <input type="checkbox"/> | | Air Arc <input type="checkbox"/> | | Calculator <input type="checkbox"/> | |
| Lumber Grading <input type="checkbox"/> | | Blueprint Reading <input type="checkbox"/> | | Motor Grader <input type="checkbox"/> | | Computer <input type="checkbox"/> | |
| Sales <input type="checkbox"/> | | Bookkeeping <input type="checkbox"/> | | Truck Driver <input type="checkbox"/> | | Word Processor <input type="checkbox"/> | |
| Maintenance on Heavy Machines <input type="checkbox"/> | | Other <input type="checkbox"/> | | Van <input type="checkbox"/> | | Other <input type="checkbox"/> | |
| | | _____ | | Flatbed <input type="checkbox"/> | | _____ | |
| | | _____ | | Forklift <input type="checkbox"/> | | _____ | |
| | | _____ | | Drill Press <input type="checkbox"/> | | _____ | |

Do you have a valid chauffeur's license? No Yes If yes, license # _____

List in order, last or present employer first. Employment record should include at least the last 10 years or more. If a student or retired within the past 10 years, please indicate.

| Dates From | To | Complete Name, Address & Telephone Number of Employer | Rate of Pay Start | Finish | Supervisor's Name & Title | Reason for Leaving |
|------------|----|-------------------------------------------------------|-------------------|--------|---------------------------|--------------------|
| | | | | | | |
| | | | | | | |

Describe in detail the work you did _____

| Dates From To | | Complete Name, Address & Telephone Number of Employer | Rate of Pay Start Finish | | Supervisor's Name & Title | Reason for Leaving |
|-----------------------------------|--|----------------------------------------------------------|----------------------------------------------|--|------------------------------|--------------------------|
| | | | | | | |
| | | | | | | |

Describe in detail the work you did _____

| Dates From To | | Complete Name, Address & Telephone Number of Employer | Rate of Pay Start Finish | | Supervisor's Name & Title | Reason for Leaving |
|-----------------------------------|--|----------------------------------------------------------|----------------------------------------------|--|------------------------------|--------------------------|
| | | | | | | |
| | | | | | | |

Describe in detail the work you did _____

| Dates From To | | Complete Name, Address & Telephone Number of Employer | Rate of Pay Start Finish | | Supervisor's Name & Title | Reason for Leaving |
|-----------------------------------|--|----------------------------------------------------------|----------------------------------------------|--|------------------------------|--------------------------|
| | | | | | | |
| | | | | | | |

Describe in detail the work you did _____

Note: Use additional sheets if necessary.
 May we contact the employers listed above? No Yes If not, list below which one(s) you do not wish us to contact and why. _____

CHARACTER REFERENCES: Do not refer to acquaintances, previous employers or relatives. Refer to three people whom you know well, either personally or in business.

| NAME | ADDRESS | PHONE # | # of YEARS KNOWN |
|----------|---------|---------|---------------------|
| 1. _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ |

Are you 18 years old or over? No Yes (Employment is subject to verification that you are of minimum legal age.)

Are you a United States citizen or can you provide proof that you can legally be employed in the United States? No Yes

What languages can you read, speak and write fluently? _____

IN CASE OF EMERGENCY NOTIFY:

Name _____ Relationship _____

Address _____ Phone() _____
Street City State Area Code

CERTIFICATION: I agree to undergo character and credit investigation at Company expense and understand that this inquiry will include, but no be limited to, personal interviews with third parties, such as family members, business associates, financial and credit sources, etc.

Further, I hereby release my former employers and other character and credit sources from all liability or damages on account of having furnished information regarding my personal character, habits, work record, credit history, etc. I agree to take polygraph, drug examinations and other examinations for pre-employment as well as during the course of my employment. I understand the examinations will be at the expense of the Company, and that they are a condition of employment. I understand and agree that my initial employment with this Company shall be probationary. I further understand that employment during the probationary period is in no way a guarantee of employment as the employment relationship is at will and may be terminated by either party at any time.

If accepted for employment, I hereby agree to abide by all rules and policies of the Company as explained in the Employee Handbook and its amendments from time to time, and to wear all personal protective equipment required for the occupation in which I am engaged. I agree to provide additional medical information which may be required or to take a medical or any other type of examination (at the expense of the Company) necessary to qualify or retain employment with the Company.

I fully understand that if I fail to answer, falsify the answer, or enter misleading answers to any question or fail to provide information which might make any of my answers on the application misleading, that this alone may result in a refusal to hire or in my termination if I am hired and I hereby agree that the Company shall not be liable in any respect if my employment is terminated or if I am not hired for this reason.

I HEREBY ACKNOWLEDGE that I have read and fully understand the above certification.

Date _____ Signature of Applicant _____

In remaining space, briefly explain why you desire to work for Flambeau River Papers LLC and why you would make a good employee: _____

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ Date _____

References checked with (1) _____
(2) _____

Comments: _____

Sex: Male Female

Acceptable for employment _____ Effective Date _____ Job Title _____ Rehire? No Yes

Full Time Part Time Part Time Student Part Time Summer Only Part Time Seasonal Temporary

Date of Insurance _____ Exempt Non-Exempt Rate _____

Approved by _____ Personnel Approval _____