Company	Name	D4	LLC
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Date 1/13/15

Please Print Clearly

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed servicemember status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Position Applied For Software Developer (list only one) Name Ian Shochlerger
Telephone Number (585) 402 - 2625 Alternate/Cellular Telephone Number ()
Present Address 199 Pacer Drive. Street, Apartment, or Unit Number WY 19967 City State Zip How long have you lived there 22 / Years/Months Email Address (optional) Desired Salary/Hourly Rate 17/hr
If under the age of 18, can you produce the necessary work certificate at the time of employment? Yes \(\mathbb{\texts}\) No \(\mathbb{\texts}\)
Type of employment desired? Full-time □ Part-time □ (Specify Hours) 20-30
Are you willing to work overtime? Yes ☑ No □
Date on which you can start work if hired 1/19/2015
Have you previously applied for employment with this Company? Yes ☑ No ☑
If Yes, when and where did you apply?
Have you ever been employed by this Company? Yes No No
If Yes, provide dates of employment, location, and reason for separation from employment.

Education	School Name and Location (Address, City, State)	Course of Study	Graduate? Y or N	# of Years Completed	Degree/Major
High School	Rush-Henrietta		7	4	
College	SUNY Fredonia	Sound Recording Technology	, 7	4	Sound Rears Technology
Bus./Tech./Trade or Post College					9

Honors Received	Cum 1					
If applicable, list below any ot your work and educational rec						us to confirm
WORK EXPERIENCE Please list the names of you employer listed first. Provide needed. If self-employed, sul a volunteer basis, internships, consideration from employmen	information for a oply firm name a or military service	at least the most rec and business reference. Your failure to cor	cent ten (10) jes. You may i	year period nclude any	 d. Attach addit y verifiable work 	tional sheets in performed or
Employer Count() Club Name	of Roch	ester 2935 Address	Eest Ave		Country Type of Bu	Club
Telephone (585) 381	- 1800	Dates Employed	From Jan	2014	то	-
Job Title Bartender		Duties				
	1		,			
Supervisor's Name Patti	Zambito	May we conf	tact? Yes	No If No	o, why not?	
	_ Final 12	Reason for Leaving _				
Wages Start	Final 12_	Reason for Leaving _				
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REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co- worker)	TELEPHONE
Matt Wilson	Studio Manager	Chautangua Instituto	Supervisor	716-481-4981
Patti Zembito	Bar Manager	CCR	Supervisor	585-746-7452

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact NAME **OCCUPATION ADDRESS TELEPHONE NUMBER OF** YEARS KNOWN Software Sfeelos 707-495-3041 24 Branchbrook, Rush NY Developer Scotsville, MY 24 Electridar

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION. IF HIRED. THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME. FOR ANY REASON. WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT. WRITTEN OR ORAL. SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER. EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT—EXPRESS OR IMPLIED—WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law. If applicable and allowed by law, I will receive separate written notification regarding the Company's intent to obtain "consumer reports."

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. Further, if hired, I authorize the company to provide truthful information concerning my employment to future employers and hold the company harmless for providing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

Applicant Signature Am (a) Moentrey	Date 0 (13) 15
If the applicant is a minor, the foregoing release and consent must be applicant's parent or legal guardian constitutes acknowledgement by the extent permitted by federal, state, and local law, can test the a property without notice, and communicate test results to Company p guardian.	the applicant and the parent or legal guardian that the Company, to applicant for illegal or controlled substances, conduct inspections of
Parent/Legal Guardian	Witness
Date	Date
UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQ PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, POLYGRAPH, OR SIMILAR TEST. AN EMPLOYER WHO VIOLAT TO A FINE NOT EXCEEDING \$100. I have read and understand the	THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR, ES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT
Applicant Signature	

UNDER MASSACHUSETTS LAW, IT IS UNLAWFUL FOR AN EMPLOYER TO REQUIRE OR TO ADMINISTER A LIE DETECTOR, POLYGRAPH OR SIMILAR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. AN EMPLOYER WHO VIOLATES THIS LAW SHALL BE SUBJECT TO CRIMINAL PENALTIES AND CIVIL LIABILITY.

FEDERAL AND/OR STATE LAW MAY PROHIBIT THE USE OF LIE DETECTOR, POLYGRAPH OR SIMILAR TEST AS WELL.

THIS APPLICATION MAY NOT BE SUFFICIENT FOR ALL INDUSTRIES OR APPROPRIATE FOR USE IN ALL LOCALITIES.