



Prior employer: \_\_\_\_\_ From (mo./yr.) \_\_\_\_\_ To (mo./yr.) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Starting Position: \_\_\_\_\_ Ending Position: \_\_\_\_\_  
 Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_ Ext. \_\_\_\_\_  
 Description of duties: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ May we contact this employer? \_\_\_\_\_

**EDUCATION**

Name and Location of School	Field of study	No. of years completed	Did you graduate?
High School			
College/University			
Business/Technical/Trade			
Other			

**REFERENCES**

Please give two technical or business references:

Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

Name: \_\_\_\_\_ Daytime phone: \_\_\_\_\_

I hereby declare that the preceding information, the information on any resume I have submitted, and the information supplied in the interview process is true, correct, and complete. I authorize a thorough investigation of my prior employment and educational background, agree to cooperate in such an investigation, and release from all liability and responsibility all persons or corporations requesting or supplying such information.

I have read the job description and have had the tasks explained to me and I represent that I am able to perform those tasks.

I understand that, should I be employed by Westak, my employment is "at-will" and may be terminated at any time by me, for any reason not prohibited by law.

**Signature of Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**FOR WESTAK USE ONLY**

DATE OF HIRE:    /    /    POSITION:    DEPT:    BASE WAGE: \$

SHIFT DIFF? YES \_\_\_ NO \_\_\_    SHIFT HOURS: \_\_\_\_\_ am / pm to \_\_\_\_\_ am / pm    REVIEW DATE:    /    /

STATUS (circle one):    Exempt    Non-Exempt    F/T    P/T    Temp

INTERVIEWED BY: \_\_\_\_\_    DATE:    /    /

APPROVED BY: \_\_\_\_\_    DATE:    /    /



## APPLICANT ITAR CERTIFICATION

### U.S. International Traffic and Arms Regulations (ITAR)

Westak is an ITAR certified facility, and positions at Westak require that employees be authorized or eligible to access ITAR controlled products and data, and as such, special conditions apply for eligibility to be employed in these roles. For information on the U.S. ITAR, go to [http://www.pmdtc.state.gov/regulations\\_laws/itar.html](http://www.pmdtc.state.gov/regulations_laws/itar.html).

All accepted applicants must be U.S. Persons as defined by ITAR. ITAR defines a U.S. Person as a US. Citizen, U.S. Permanent Resident (i.e. "Green Card Holder"), Political Asylee, or Refugee.

During the employment application process candidates may be required to disclose citizenship (including any dual citizenship or nationality) and country of birth for ITAR compliance purposes.

1. I certify that I am a U.S. Citizen, U.S. Permanent Resident (i.e. "Green Card Holder"), Political Asylee, or Refugee.
2. I understand that my answer to this question is subject to audit and that I will be asked to provide verification documentation if hired. The following is a list of acceptable documents:
  - a. Citizen
    - i. Birth Certificate **or**
    - ii. US Passport
  - b. Permanent Resident
    - i. USCIS Form I-1551 (Permanent Resident Card)
  - c. Protected Individual (Asylee/Refugee)
    - i. Form I-94 or I-94A **or**
    - ii. Form I-766 (Employment Authorization Document) noting (a)(3) or (a)(5) category
3. I certify that the information that I am providing is true, correct and complete to the best of my knowledge. I understand that deliberate falsification of this information is a violation of the Westak ITAR policy.

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Name

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Signature

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Date



**EMPLOYER REVIEW AND VERIFICATION**

Employee Name (Last, First MI) from Page 1: \_\_\_\_\_

Document Title: \_\_\_\_\_

Issuing Authority: \_\_\_\_\_

Document Number: \_\_\_\_\_

Expiration Date (if any) \_\_\_\_\_

**Certification**

I certify that (1) I have examined the document(s) presented by the above-named employee, (s) the document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is considered a "US Person" under ITAR regulations.

<b>Employer or Authorized Representative Signature</b>	<b>Date</b>
<b>Name of Person Signing</b>	<b>Job Title</b>

**Reverification and Rehires**

If the employee's previous grant of employment authorization has expired, provide the information for the new document presented that establishes current US Person status.

<b>Document Title</b>	<b>Document Number</b>	<b>Expiration Date (if any)</b>
<b>Employer or Authorized Representative Signature</b>	<b>Date</b>	<b>Print Name</b>