



GE Employment Application

For Use by GE and GE Affiliates*
An Equal Opportunity Employer

It is the policy of GE and GE's affiliate businesses (GE and GE Affiliates are separate and distinct legal entities) to employ, train, compensate, promote and provide other terms and conditions of employment, without regard to a person's race, color, religion, national origin, sex (including pregnancy), sexual orientation, age, disability, veteran status, or other characteristics protected by law. This application must be completed in full. Please print or type. Answer every question.

EMPLOYMENT ELIGIBILITY

The Immigration Reform and Control Act of 1986 prohibits the employment of unauthorized aliens, and requires employers to verify the employment eligibility of all new employees. An offer of employment made by the Company will be conditioned upon your providing the documentation required by law as evidence of your personal identity and your authorization to work in the United States. Any offer of employment is also conditioned upon the successful completion of a background investigation, a post-offer physical evaluation (if applicable) and a drug screen.

PERSONAL DATA

Name:

Date of Application:

Last

First

Middle

Previous/Different last name(s) used in past 7 years, including maternal last name, if applicable (do not answer question if applying for a position at GE Asset Management.) Please indicate N/A if you have no other names:

Street
Address:

City: State/Province: Country: ZIP/Postal Code:

Email Address: Are you 18 years of age or older? ☐ Yes ☐ No

Telephone (day): (evening): Social Security No.:

Are you legally authorized to work in the United States?

If "Yes", will you now, or in the future, require sponsorship for GE or GE affiliate employment (for example, if you currently have a F, J, H or L visa status)?

☐ Yes ☐ No

☐ Yes ☐ No

JOB INTEREST

What position are you applying for?:

Date Available For Employment:

How or by whom were you referred to us?

Please provide your drivers license number. Your motor vehicle record will be checked if you are applying for a position that requires you to operate a GE owned/leased, privately owned/leased or rental vehicle for company business.

Name On License:

State:

License #:

EDUCATION AND TRAINING (please do not abbreviate school names)

Please list only those educational institutions where you attended classes (physically or online) and do not include those educational institutions where your degree was acquired by only fulfilling life experience requirements and/or paying a one-time flat fee.

Full School Name	City	State	Country	Major Course or Subject	Did You Graduate?	IF NO. Last Year Attended	Degree
High School or GED (Testing Site)					Yes <input type="checkbox"/> No <input type="checkbox"/>		
Trade School / Technical School:					Yes <input type="checkbox"/> No <input type="checkbox"/>		
College:					Yes <input type="checkbox"/> No <input type="checkbox"/>		
Graduate School:					Yes <input type="checkbox"/> No <input type="checkbox"/>		
Other Education:					Yes <input type="checkbox"/> No <input type="checkbox"/>		
Please indicate name(s) used during highest level of education:							

PRIVACY STATEMENT

At GE and GE's affiliate businesses* we are committed to protecting your privacy. Your personal information will be maintained in an electronic database in the U.S. and will be processed by a third party provider for purposes of conducting background investigations. Your personal information will be used by GE and GE's affiliate businesses* for recruitment, GE and GE's affiliate businesses* human resource processes and background check purposes. It will be protected internationally according to GE's and GE's affiliate businesses* Candidate Data Protection Standards. The electronic database has security measures in place to protect the loss, misuse, unauthorized access or disclosure, alteration or destruction of the information under our control. By submitting your personal information and signing this application, you agree that GE and GE's affiliate businesses* may process it for recruitment, human resources processes and background check purposes and transfer it worldwide consistent with GE's and GE's affiliate businesses* Candidate Data Protection Standards. For the full text of GE's and GE's affiliate businesses* Candidate Data Protection Standards, please refer to: http://www.gecareers.com/GECAREERS/html/us/searchJobs/candidate_privacy.html.

PRIOR ADDRESS INFORMATION

Please indicate all addresses – other than the current address indicated on Page 1 – that you have used in the last seven years.

Street Address _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Country: _____ Dates At This Address: _____ FROM: _____ TO: _____

Street Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Country: _____ Dates At This Address: _____ FROM: _____ TO: _____

Street Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Country: _____ Dates At This Address: _____ FROM: _____ TO: _____

Street Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Country: _____ Dates At This Address: _____ FROM: _____ TO: _____

Street Address: _____

City: _____ State/Province: _____ ZIP/Postal Code: _____

Country: _____ Dates At This Address: _____ FROM: _____ TO: _____

EMPLOYMENT

Have you ever been on the payroll at GE or a GE affiliated business*?

☐ Yes ☐ No. If yes, which business?

Dates Employed From:

Location?

Dates Employed To:

Are you currently subject to a non-compete or employment agreement with another employer? ☐ Yes ☐ No

Starting with your current or most recent employment, list all previous employers. Include self-employment, military service, summer and part-time jobs for at least the last seven years. Include at least your three most recent employers, if applicable. Must be completed in full for each employer. Writing "See resume" is not acceptable. If a contract worker assignment, list the name of the company that **PAID** you, not the company where you were assigned to work.

CURRENT/PREVIOUS EMPLOYER (Please use complete names—no abbreviations. If self-employed, indicate name of business entity.)

Company Name:

Start Date:

End Date:

Job Title and Duties:

Street Address:

Department:

City:

State:

Country:

Telephone Number: () -

When may we contact this employer? ☐ Now ☐ After acceptance of conditional offer

Reason For Leaving:

Name & Title of Mgr (or Commanding Officer):

Company Name:

Start Date:

End Date:

Job Title and Duties:

Street Address:

Department:

City:

State:

Country:

Telephone Number: () -

Reason For Leaving:

Name & Title of Mgr (or Commanding Officer):

Company Name:

Start Date:

End Date:

Job Title and Duties:

Street Address:

Department:

City:

State:

Country:

Telephone Number: () -

Reason For Leaving:

Name & Title of Mgr (or Commanding Officer):

Company Name:

Start Date:

End Date:

Job Title and Duties:

Street Address:

Department:

City:

State:

Country:

Telephone Number: () -

Reason For Leaving:

Name & Title of Mgr (or Commanding Officer):

Are you currently debarred, suspended or otherwise ineligible to work on any federally funded program?

Yes ☐ No ☐

FOR APPLICANTS IN MARYLAND AND MASSACHUSETTS

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Applicant's Acknowledgement: _____

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SELF IDENTIFICATION

We request that you provide the following information on a voluntary basis. The Federal Government requires us to report on the sex and race of every applicant. This information is requested for statistical purposes only, and will not be kept with your application or used in connection with any employment decisions. There will be no negative consequences to you if you choose not to provide this information. (Mark only one sex and one race/ethnic group.)

SEX: ☐ Male ☐ Female

RACE/ETHNICITY:

- ☐ Hispanic or Latino (Ethnicity) (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)
- ☐ American Indian or Alaska Native* (Race) (A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.)
- ☐ Asian* (Race) (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)
- ☐ Black or African American* (Race) (A person having origins in any of the black racial groups of Africa.)
- ☐ Native Hawaiian or Other Pacific Islander* (Race) (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)
- ☐ White* (Race) (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)
- ☐ Two or More Races* (All persons who identify with more than one of the above five races.)

*Not Hispanic or Latino

Applicant Name (Please Print): _____

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ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application. This could include any specialized training or courses you have completed that will aid in evaluating your qualifications for the position you are seeking. (Example: If applying for a clerical position, note training such as word processing, typing, calculator, computer, hardware, software, etc.) Please include grade or other indicator of achievement, such as words per minute typed. You should feel free to attach a resume.

REFERENCES

Please list at least three business or school related references that GE and GE's affiliate businesses* may contact regarding your application. Do not include relatives.

<u>Reference Name</u>	<u>Address</u>	<u>Daytime Phone Number</u>
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1.

2.

3.

COMMITMENT TO INTEGRITY

GE and GE's affiliate businesses* commitment to integrity is an integral part of our success. As such, all employees must acknowledge in writing their commitment to adhering to GE's and GE's affiliate businesses* policies and reporting concerns about possible violations.

APPLICANT RELEASE AND ACKNOWLEDGEMENT

I understand that GE and GE's affiliate businesses* (hereinafter referred to as the Company) requires certain information about me to evaluate my qualifications for employment and to conduct its business if I become an employee. Therefore, I authorize the Company to investigate my past employment, educational credentials, and other employment-related activities. I agree to cooperate in such investigations and release those parties supplying such information to the Company from all liability or responsibility with respect to information supplied.

I agree that the Company may use the information it obtains concerning me in the conduct of its business. I understand that such use may include disclosure outside the Company in those cases where its agents and contractors need such information to perform their functions, where their company's legal interests and/or obligations are involved, or where there is a medical emergency involving me. I understand, however that the Company intends to protect the confidentiality of personal information it obtains concerning me to the extent required by law.

I agree that I will not disclose or use while interviewing with or employed with GE and GE's affiliate businesses* any confidential or proprietary information of others, including any former employer.

I understand that any employment with the Company would not be for any fixed period of time and that, if employed, I may resign at any time, for any reason, or the Company may terminate my employment at any time for any reason in the absence of a specific written agreement to the contrary. I understand that my employment-at-will status may not be modified or changed except in writing and signed by a duly authorized officer of the Company.

I understand that any false answers or statements made by me on this application, any supplement thereto (including, but not limited to, the Criminal Convictions Questionnaire and Section 19 Compliance Questionnaire, as applicable) or in connection with the above-mentioned investigations may be grounds for refusal of employment, invalidate my employment or, if employed, will be sufficient grounds for immediate discharge and render me ineligible for any Company benefits.

My signature below acknowledges that I have read, understand, and agree to the terms of the entire application.

Applicant's Signature:

Date:

Applicant Name (Please Print): _____

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