

REGAL-BELOIT CORPORATION

and its Divisions and Subsidiaries are Equal Opportunity Employers

Division Name / City, State

EMPLOYMENT APPLICATION

Name: _____
Last First Middle

Date: _____ S.S. # _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ E-mail Address: _____

PERSONAL AND CONFIDENTIAL

- 1) This application will be considered active for 90 days. If you wish to be considered for employment thereafter, request and submit another application.
- 2) Applicants will receive consideration for employment without regard to race, color, religion, sex, age, national origin, disability, or veteran status.
- 3) In compliance with our responsible hiring policy, thorough reference checks will be performed on all job candidates prior to an offer of employment. As a condition of employment, all candidates will be required to pass a pre-employment drug screen after an offer of employment is made.
- 4) Unless otherwise stated in writing by the Chief Executive Officer, all employment with Regal-Beloit Corporation will be considered at-will. Under this arrangement either party may end the employment relationship at any time, for any reason.
- 5) If you are in need of help or reasonable accommodation with this application or anytime during the interview process, please advise us.

In order for us to fairly evaluate all candidates, please answer all areas completely, accurately and honestly.

PERSONAL DATA

NAME (LAST)	(FIRST)	(MIDDLE)	SOCIAL SECURITY NO.
ARE YOU ABLE TO VERIFY LEGAL ELIGIBILITY FOR EMPLOYMENT IN THE U.S.A.? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF NO, EXPLAIN	
HAVE YOU EVER BEEN CONVICTED OF A CRIME? (Omit minor traffic violations) NOTE: A conviction record will not necessarily bar applicant from employment. <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, EXPLAIN	
Is any additional information relative to change of name, use of assumed name, or nickname necessary to enable a check being made of your work record? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, EXPLAIN	
POSITION DESIRED	SALARY REQUIREMENTS	ARE YOU AT LEAST 18 YRS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO	

HOW WERE YOU REFERRED TO REGAL-BELOIT CORPORATION?

ARE YOU WILLING TO TRAVEL? YES NO % ____ ARE YOU WILLING TO RELOCATE? YES NO RESTRICTIONS: _____

DATE AVAILABLE FOR EMPLOYMENT

Have you ever applied for work OR worked for this Company or any of its subsidiaries or affiliates before? <input type="checkbox"/> YES <input type="checkbox"/> NO	If Yes, Location Date: / /
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EDUCATION & TRAINING

Circle Highest Grade Completed in each School Category

High School	Tech School	College	Grad School
9 10 11 12	1 2	1 2 3 4	1 2 3 4

Name	Location	Diploma, Degree or Certification	Did you Graduate?
High School			
College			
Graduate School			
Apprentice, Business, Technical, Military or Vocational School			

LIST ANY SPECIAL SKILLS OR KNOWLEDGE YOU POSSESS SUCH AS: COMPUTERS, CAD, ISO, LANGUAGES, ETC.

REFERENCES

List four references from current or prior employment:

Name	Address	Daytime Phone	Occupation	Relationship	Years Known
Name	Address	Daytime Phone	Occupation	Relationship	Years Known
Name	Address	Daytime Phone	Occupation	Relationship	Years Known
Name	Address	Daytime Phone	Occupation	Relationship	Years Known

MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, SIGN HERE
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In order for us to fairly evaluate all candidates, please answer all areas completely, accurately and honestly.

EMPLOYMENT (List present or most recent first)

DATES (MO. & YR.)		EMPLOYER	TITLE OR POSITION (Describe Duties)	SALARY	
FROM	TO			STARTING BASE	Bonus
		NAME		_____	per year
		ADDRESS		_____	Bonus
		CITY AND STATE		_____	ENDING BASE
		CO. TELEPHONE		_____	per year
		SUPERVISOR	SPECIFIC REASON FOR LEAVING:	_____	Bonus
DATES (MO. & YR.)		EMPLOYER	TITLE OR POSITION (Describe Duties)	SALARY	
FROM	TO			STARTING BASE	Bonus
		NAME		_____	per year
		ADDRESS		_____	Bonus
		CITY AND STATE		_____	ENDING BASE
		CO. TELEPHONE		_____	per year
		SUPERVISOR	SPECIFIC REASON FOR LEAVING:	_____	Bonus
DATES (MO. & YR.)		EMPLOYER	TITLE OR POSITION (Describe Duties)	SALARY	
FROM	TO			STARTING BASE	Bonus
		NAME		_____	per year
		ADDRESS		_____	Bonus
		CITY AND STATE		_____	ENDING BASE
		CO. TELEPHONE		_____	per year
		SUPERVISOR	SPECIFIC REASON FOR LEAVING:	_____	Bonus
DATES (MO. & YR.)		EMPLOYER	TITLE OR POSITION (Describe Duties)	SALARY	
FROM	TO			STARTING BASE	Bonus
		NAME		_____	per year
		ADDRESS		_____	Bonus
		CITY AND STATE		_____	ENDING BASE
		CO. TELEPHONE		_____	per year
		SUPERVISOR	SPECIFIC REASON FOR LEAVING:	_____	Bonus

LIST OTHER FORMS OF COMPENSATION OR INFORMATION ABOUT YOUR **LAST** POSITION IN THE SPACE BELOW:

PLEASE TELL US IN YOUR OWN WORDS WHAT WILL MAKE YOU A SUCCESSFUL EMPLOYEE:

DISCLOSURE OF PRIOR BUSINESS AGREEMENTS

As part of the hiring process it is important to be aware of any and all previous employment agreements which may impact on your employment with us. Therefore, please indicate if you have ever signed:

- | | Yes | No | | Yes | No |
|----------------------------------|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| • a non-compete agreement | <input type="checkbox"/> | <input type="checkbox"/> | • Confidentially agreement | <input type="checkbox"/> | <input type="checkbox"/> |
| • Secrecy or invention agreement | <input type="checkbox"/> | <input type="checkbox"/> | • Patent agreement | <input type="checkbox"/> | <input type="checkbox"/> |

If the answer to any of these is yes, please tell:

- The nature of the agreement: _____
- When you signed it: _____
- With whom was the agreement made: _____

Should I become an employee of Regal-Beloit Corporation or any of its divisions or subsidiaries, I agree, in consideration of such employment, that I will not divulge to others or use for my own benefit any confidential information or trade secrets obtained during the course of my employment relating to sales, formulas, processes, manufacturing methods, machines, compositions, ideas, improvements or inventions belonging to or relating to the affairs of Regal-Beloit Corporation or any of its divisions, subsidiaries or affiliated companies, without first obtaining the written permission of the Chief Executive Officer of Regal-Beloit Corporation. Furthermore, if I accept employment I will comply with all policies related to business conduct and ethical behavior.

Applicant's signature _____
Date _____

ALL APPLICANTS MUST READ AND COMPLETE THIS SECTION

I certify that the foregoing information is complete and accurate, and recognize that falsifications or omissions may result in my dismissal, if hired. I authorize Regal-Beloit Corporation to act as my agent in securing information about me from any person or company without liability to such person or company or Regal-Beloit Corporation. I am further authorizing and requesting all current and previous employers, educational institutions or others who possess information about my suitability for employment to share that information with Regal-Beloit Corporation or its agents. This may include: a statement of the reason why I am no longer employed by a specific organization, work performance and abilities, or other pertinent information relative to the position for which I am applying. I agree that, if hired, I will conform to the rules and regulations of Regal-Beloit Corporation and further understand and agree that my employment is for no definite period and may, regardless of the time and manner of payment of my wages and salary, be terminated at any time by me or Regal-Beloit Corporation, with or without cause, without any previous notice. Further, I understand that no manager or representative of the Company, other than the Chief Executive Officer has any authority to enter into any agreement guaranteeing employment for any specified period of time. I understand that employment with Regal-Beloit Corporation is conditional upon a favorable pre-employment drug screen to which I will consent.

SIGNATURE OF APPLICANT: _____ DATE: _____
PRINTED NAME OF APPLICANT: _____