



## EMPLOYMENT APPLICATION

As an EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER, Remington Outdoor Company ("ROC") does not discriminate against applicants or employees because of their age, race, color, national origin, sex (except where sex is a bona fide occupational qualification) or on any other basis prohibited by law. Furthermore, ROC will not discriminate against an applicant or employee because he or she is mentally or physically disabled, a disabled veteran, or a veteran of the Vietnam era, provided he or she is qualified and meets the requirements established by ROC for the job. Finally, as a Federal Contractor, we use E-VERIFY to verify employment eligibility of newly hired employees, regardless of citizenship.

<b>PLEASE PRINT OR TYPE CLEARLY</b>	DATE
NAME (Last) (First) (Middle)	CELLULAR PHONE NUMBER ( )
CURRENT ADDRESS (Street) (City) (State) (Zip Code)	HOME PHONE NUMBER ( )
RESIDENT ADDRESS (Street) (If different from above) (City) (State) (Zip Code)	PHONE NUMBER ( )
Email Address:	

ARE YOU 18 YEARS OR OLDER  YES  NO IF NOT, STATE YOUR DATE OF BIRTH \_\_\_\_\_

<b>TYPE OF POSITION DESIRED</b>
POSITION APPLIED FOR:

<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME <input type="checkbox"/> SUMMER <input type="checkbox"/> OTHER	SALARY EXPECTED
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WILL YOU RELOCATE? <input type="checkbox"/> YES <input type="checkbox"/> NO	TO WHAT AREA?	WILL YOU TRAVEL? <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE AVAILABLE TO WORK
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HAVE YOU EVER WORKED FOR REMINGTON OUTDOOR COMPANY?  IF YES, WHEN AND WHERE?	DO YOU HAVE ANY RELATIVES THAT WORK FOR REMINGTON OUTDOOR COMPANY OR ARE YOU AWARE IF A RELATIVE IS EMPLOYED BY A CUSTOMER OR SUPPLIER OF REMINGTON OUTDOOR COMPANY? IF YES, PLEASE LIST NAMES AND POSITIONS (IF KNOWN).
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How were you referred to Remington Outdoor Company?

To comply with the Immigration Reform and Control Act of 1986, if you are hired you will be required to provide documents to establish your identity and your authorization to be employed in the United States. Such documents will be required within the first three (3) business days following your hire; or upon your first day of work if your employment period will be less than three (3) days.

It is our policy to do a post offer drug screen for all jobs. Are you willing to take this test?  YES  NO

Please be advised that Federal law specifies certain persons who must be denied access to substantially completed firearms, called "Prohibited Persons." As a responsible manufacturer of firearms and ammunition, it is Remington's policy that all employees are eligible to have access to substantially completed firearms. To ensure compliance, all hires are subject to a criminal background check as part of the onboarding process. More detailed information will be provided in the event you are offered a position at the Company. In general terms, however, "Prohibited Persons" are (1) persons who are under indictment or who have been convicted in any court for a felony, or any other crime, for which the judge could have imprisoned you for more than one year; (2) fugitives from justice; (3) unlawful users of, or addicted to, marijuana, drugs, or controlled substances; (4) persons who have been adjudicated mentally defective or involuntarily committed to a mental institution; (5) persons who have been dishonorably discharged from the Armed Forces; (6) persons subject to a restraining order involving harassing, stalking, or threatening their child or intimate partner; (7) persons convicted of a misdemeanor crime of domestic violence; (8) persons who have renounced their US citizenship; and (9) illegal aliens.

## RECORD OF EDUCATION

Names and Address of School	Dates Attended		Graduated		Type of Degree/ Diploma Received or Expected	Major/Minor Field of Study
	From	To	YES	NO		
	Mo/Yr	Mo/Yr				
<b>High School (Last Attended) or GED:</b> _____ _____ _____						
<b>College/Universities:</b> _____ _____ _____						
<b>Graduate School:</b> _____ _____ _____						
<b>Other (Business, Technical, Secretarial):</b> _____ _____ _____						

LIST ANY CLUBS, ORGANIZATIONS, SOCIETIES, OR PROFESSIONAL GROUPS TO WHICH YOU BELONG WHICH HAVE A DIRECT BEARING UPON YOUR QUALIFICATIONS FOR THE JOB THAT YOU ARE SEEKING.

\_\_\_\_\_

\_\_\_\_\_

LIST ANY HOBBIES OR INTERESTS WHICH HAVE A DIRECT BEARING ON THE JOB FOR WHICH YOU ARE APPLYING.

\_\_\_\_\_

\_\_\_\_\_

LIST ANY SPECIAL SKILLS OR ABILITIES WHICH DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.

\_\_\_\_\_

DO YOU POSSESS A VALID CURRENT DRIVER'S LICENSE (ONLY FOR JOBS REQUIRING DRIVING A VEHICLE)?  
 YES  NO

DRIVER'S LICENSE NUMBER AND STATE \_\_\_\_\_

### MILITARY SERVICE RECORD

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES?     YES     NO

IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE WHICH DIRECTLY RELATE TO THE JOB WHICH YOU ARE APPLYING.

\_\_\_\_\_

## PREVIOUS EMPLOYMENT

<b>1. NAME AND ADDRESS OF EMPLOYER</b>	<u>STARTING POSITION</u>	<u>ENDING POSITION</u>
	<b>SALARY</b>	<b>NAME AND TITLE OF SUPERVISOR</b>
	Starting \$	Ending \$
From Mo. _____ Yr. _____ TO Mo _____ Yr _____	<b>REASON FOR LEAVING</b>	
PHONE NUMBER Area Code (    )	May we contact Supervisor? [   ] Yes    [   ] No	
<b>Job Duties</b>		
<b>2. NAME AND ADDRESS OF EMPLOYER</b>	<u>STARTING POSITION</u>	<u>ENDING POSITION</u>
	<b>SALARY</b>	<b>NAME AND TITLE OF SUPERVISOR</b>
	Starting \$	Ending \$
From Mo. _____ Yr. _____ TO Mo _____ Yr _____	<b>REASON FOR LEAVING</b>	
PHONE NUMBER Area Code (    )		
<b>Job Duties</b>		
<b>3. NAME AND ADDRESS OF EMPLOYER</b>	<u>STARTING POSITION</u>	<u>ENDING POSITION</u>
	<b>SALARY</b>	<b>NAME AND TITLE OF SUPERVISOR</b>
	Starting \$	Ending \$
From Mo. _____ Yr. _____ TO Mo _____ Yr _____	<b>REASON FOR LEAVING</b>	
PHONE NUMBER Area Code (    )		
<b>Job Duties</b>		

USE THIS SPACE TO INCLUDE ANY ADDITIONAL INFORMATION WHICH YOU FEEL MAY BE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING.

<p>ARE YOU A PARTY TO A NON-COMPETE AGREEMENT WITH ANY OF YOUR PREVIOUS EMPLOYERS? [ ] YES [ ] NO</p> <p>IF YES, PLEASE PROVIDE COPIES OF AGREEMENT(S).</p>
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**This Application shall only remain active for 60 days. After 60 days, if you are still interested in employment at Remington Outdoor Company, you must fill out a new application.**

**REMINGTON OUTDOOR COMPANY EMPLOYEES OR APPLICANTS FOR EMPLOYMENT ARE SUBJECT TO TESTING FOR DRUG USE, INCLUDING MARIJUANA.**

Offers of employment for some classifications are conditioned upon the results of a physical examination given by a representative of the Company's medical staff.

I hereby certify that all statements made in this application and interview(s) are true and correct to the best of my knowledge and belief. I understand and agree that any false or misleading information or omission of facts given in my application or interview(s) may be justification for refusal to hire or termination of employment.

I further understand that an investigative report may be made as to my character and general reputation. I authorize all past employers, schools, persons and organizations including, but not limited to, law enforcement agencies and licensing agencies, having relevant information or knowledge to provide it to ROC or its duly authorized representative for its use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release employers, schools, persons and organizations from all liability in responding to inquiries in connection with my application. Upon written request by me, within a reasonable period of time, ROC will make available to me the nature and scope of all reports of every type obtained.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Remington Outdoor Company, its subsidiaries and affiliates, and me for either employment or for the providing of a benefit. If an employment relationship is established, I understand and acknowledge that it is of an "at will" nature, which means that my employment can be terminated at any time, with or without cause, at the option of either ROC or myself. I further understand that this "at will" employment relationship cannot be changed by any written document or conduct unless such change is specifically authorized in writing by an authorized officer of ROC.

In signing this form, I certify that I understand all the questions and statements in this application.

Further, if granted a position with Remington Outdoor Company, or any of its subsidiaries or affiliates, I will comply with all its rules and regulations, including the Business Conduct Policy and Non-Disclosure Agreement.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**FOR HUMAN RESOURCES USE ONLY**

DATE APPLICATION RECEIVED	REFERRAL SOURCE
INTERVIEWED BY	DEPARTMENT
REFERENCE CHECK COMPLETED (DATE AND BY WHOM)	
DISPOSITION AND REASON	



**VOLUNTARY APPLICANT  
DATA RECORD**

Remington Outdoor Company is an Equal Opportunity Employer. As required by law, we must record certain information in order to comply with our Affirmative Action Program.

We do not discriminate in our hiring or employment practices on the basis of race, color, national origin, age, religion, disability status, veteran status, gender, sexual orientation, marital status or any other protected status as governed by federal, state and local laws.

Various government agencies request statistical information regarding our hiring practices. **Your cooperation in providing this information is completely voluntary. Any information gathered is strictly confidential and refusal to provide this information will have no bearing on your employment application and will not subject you to any adverse treatment.**

If you choose to provide this information, we appreciate your cooperation.

Name \_\_\_\_\_ Date \_\_\_\_\_

I choose not to disclose any information

<u>Race or Ethnic Identity</u>	<u>Gender</u>	<u>Disability</u>	<u>Veteran Status</u>
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Female	<input type="checkbox"/> Individual with Disabilities	<input type="checkbox"/> Vietnam Era Veteran
<input type="checkbox"/> White (not Hispanic or Latino)	<input type="checkbox"/> Male	<input type="checkbox"/> I choose not to disclose	<input type="checkbox"/> Disabled Veteran
<input type="checkbox"/> Black or African American (not Hispanic or Latino)	<input type="checkbox"/> I choose not to disclose		<input type="checkbox"/> Special Disabled Veteran
<input type="checkbox"/> Native Hawaiian or Pacific Islander (not Hispanic or Latino)			<input type="checkbox"/> Other Protected Veteran
<input type="checkbox"/> Asian (not Hispanic or Latino)			<input type="checkbox"/> Recently Separated Veteran
<input type="checkbox"/> American Indian or Alaskan Native (not Hispanic or Latino)			<input type="checkbox"/> Armed Forces Service Medal Veteran
<input type="checkbox"/> Two or More Races (not Hispanic or Latino)			<input type="checkbox"/> I choose not to disclose
<input type="checkbox"/> I choose not to disclose			