

EMPLOYMENT APPLICATION

**An Equal Opportunity Employer Dedicated
to Affirmative Action and Workforce Diversity**

BOMBARDIER
the evolution of mobility

Bombardier Mass Transit Corporation
71 Wall Street
Plattsburgh, NY 12901 United States
Fax (855) 231-4716
www.bombardier.com

LAST NAME	FIRST NAME	MIDDLE NAME	PROVIDE ANY OTHER NAMES PREVIOUSLY USED
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STREET ADDRESS

CITY	STATE	ZIP	AREA CODE/ PHONE NUMBER
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POSITION DESIRED	SALARY REQUIRED
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LOCATION DESIRED	WILLING TO RELOCATE? <input type="checkbox"/> YES <input type="checkbox"/> NO
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HAVE YOU PREVIOUSLY BEEN EMPLOYED BY BOMBARDIER TRANSPORTATION OR ANY OF ITS PREDECESSORS?
 WESTINGHOUSE TRANSPORTATION AEG WESTINGHOUSE TRANSPORTATION AEG TRANSPORTATION ADTRANZ
 ABB TRACTION IF APPLICABLE, PLEASE LIST COMPANY LOCATION AND DATES OF EMPLOYMENT.

REASON FOR LEAVING	JOB TITLE
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WHAT PROMPTED YOUR INTEREST IN BOMBARDIER TRANSPORTATION?
 ADVERTISEMENT EMPLOYMENT AGENCY OWN ACCORD OTHER
 EMPLOYEE REFERRAL/NAME

DO YOU HAVE A RELATIONSHIP (PERSONAL, FAMILY OR BUSINESS) WITH ANYONE WORKING FOR BOMBARDIER OR ITS CUSTOMERS? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PROVIDE NAME, RELATIONSHIP AND LOCATION
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CAN YOU LEGALLY WORK IN THE U.S.? YES NO

NOTE: YOU MUST PRODUCE DOCUMENTATION OF CITIZENSHIP OR ELIGIBILITY TO WORK IN THE UNITED STATES. WITHIN 3 DAYS OF BECOMING EMPLOYED (IMMIGRATION REFORM ACT 1986). BOMBARDIER TRANSPORTATION PARTICIPATES IN E-VERIFY THROUGH THE US DEPARTMENT OF HOMELAND SECURITY & SOCIAL SECURITY ADMINISTRATION TO DETERMINE WHETHER FORM I-9 DOCUMENTATION IS VALID.

U. S. MILITARY SERVICE

IF YOU SERVED IN THE U. S. ARMED FORCES, LIST BELOW ANY SPECIAL TRAINING OR OTHER EXPERIENCE WHILE YOU WERE IN THE SERVICE.

SERVICE DATES FROM:	TO:	BRANCH	RATE OR RANK	PRESENT CLASSIFICATION
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DUTIES IN SERVICE

GENERAL INFORMATION

IF YOU HAVE EVER BEEN GRANTED A SECURITY CLEARANCE, PLEASE COMPLETE THE FOLLOWING:

LEVEL OF CLEARANCE	DATE GRANTED	GRANTING AGENCY
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LOCATION	HAS CLEARANCE EVER BEEN REVOKED? <input type="checkbox"/> YES <input type="checkbox"/> NO
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HAVE YOU EVER BEEN BONDED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, HAS IT EVER BEEN SUSPENDED OR REVOKED? PLEASE EXPLAIN.
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EMPLOYMENT HISTORY (THIS SECTION MUST BE COMPLETED.)

PLEASE LIST ALL EMPLOYMENT AND PERIODS OF UNEMPLOYMENT. YOU MAY ATTACH A SEPARATE SHEET IF MORE SPACE IS NEEDED.

FROM	TO	PRESENT OR LAST EMPLOYER	AREA CODE/ PHONE NUMBER
JOB TITLE		ADDRESS	
IMMEDIATE MANAGER		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
IMMEDIATE MANAGER'S TITLE			
REASON FOR LEAVING			
STARTING POSITION		ENDING POSITION	
FROM	TO	PREVIOUS EMPLOYER	AREA CODE/ PHONE NUMBER
JOB TITLE		ADDRESS	
IMMEDIATE MANAGER		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
IMMEDIATE MANAGER'S TITLE			
REASON FOR LEAVING			
STARTING POSITION		ENDING POSITION	
FROM	TO	PREVIOUS EMPLOYER	AREA CODE/ PHONE NUMBER
JOB TITLE		ADDRESS	
IMMEDIATE MANAGER		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
IMMEDIATE MANAGER'S TITLE			
REASON FOR LEAVING			
STARTING POSITION		ENDING POSITION	

EMPLOYMENT HISTORY (CONTINUED)**SUMMARIZE OTHER FULL-TIME OR PART-TIME EMPLOYMENT.**

COMPANY	ADDRESS	DATES EMPLOYED	POSITION HELD
WERE YOU EVER DISCHARGED OR LAID OFF FROM A POSITION? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE PROVIDE THE NAME OF THE EMPLOYER(S), THE DATE OF YOUR DISCHARGE(S) OR LAYOFF(S), AND THE REASON FOR SUCH DISCHARGE(S) OR LAYOFF(S).		

EDUCATION AND TRAINING

NAME AND LOCATION	NUMBER OF YEARS COMPLETED	COURSE CONCENTRATION	TYPE OF DEGREE OBTAINED
HIGH SCHOOL			

DO YOU HAVE A GENERAL EQUIVALENCY DIPLOMA (GED) INSTEAD OF A HIGH SCHOOL DIPLOMA? YES NO
(IF YES, YOU WILL BE REQUESTED TO COMPLETE A GED VERIFICATION FORM.)

NAME AND LOCATION	NUMBER OF YEARS COMPLETED	COURSE CONCENTRATION	TYPE OF DEGREE OBTAINED	DATES OF ATTENDANCE
COLLEGE				
TRADE OR BUSINESS				

IF ATTENDED OR GRADUATED UNDER A DIFFERENT NAME, PLEASE IDENTIFY.

SCHOLASTIC HONORS, SCHOLARSHIPS, ETC.

PLEASE LIST ANY ORGANIZATIONS, CLUBS, SOCIETIES, ACTIVITIES OR OTHER ASSOCIATIONS IN WHICH YOU PARTICIPATED OR BELONGED THAT YOU FEEL MAY BE RELEVANT TO THE POSITION FOR WHICH YOU HAVE APPLIED. (YOU MAY EXCLUDE ANY SUCH ORGANIZATIONS OR ACTIVITIES THAT INDICATE RACE, CREED, ANCESTRY, COLOR, RELIGION, SEX, SEXUAL ORIENTATION, GENDER IDENTITY OR EXPRESSION, NATIONAL ORIGIN, CITIZENSHIP, DISABILITY, AGE, MILITARY SERVICE, STATUS AS A VETERAN, OR ANY OTHER CRITERIA OR CLASS PROTECTED BY FEDERAL, STATE OR LOCAL LAW.)

LIST ANY SPECIALIZED SKILLS, QUALIFICATIONS, OR TRAINING THAT YOU BELIEVE MAY BE RELEVANT TO THE POSITION FOR WHICH YOU ARE APPLYING (COMPUTER LANGUAGES, OFFICE EQUIPMENT KNOWLEDGE, WELDING, MACHINING, FOREIGN LANGUAGES, MS OFFICE SOFTWARE, PROFESSIONAL CERTIFICATES, ASSOCIATIONS OR AFFILIATIONS, ETC.)

LIST PATENTS, PATENT APPLICATIONS, DISCLOSURES, BOOKS, ARTICLES, AND THOSE AUTHORED.

REFERENCES**LIST THREE BUSINESS OR PROFESSIONAL REFERENCES WHO ARE NOT RELATED TO YOU.**

NAME	OCCUPATION	YEARS KNOWN
ADDRESS		AREA CODE/ PHONE NUMBER
NAME	OCCUPATION	YEARS KNOWN
ADDRESS		AREA CODE/ PHONE NUMBER
NAME	OCCUPATION	YEARS KNOWN
ADDRESS		AREA CODE/ PHONE NUMBER
MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTACT NAME	AREA CODE/ PHONE NUMBER
MAY WE CONTACT YOUR PREVIOUS EMPLOYERS? <input type="checkbox"/> YES <input type="checkbox"/> NO		

APPLICATION AND EMPLOYMENT CERTIFICATIONS AND REQUIREMENTS

(Please read the following certifications and statements. Your signature at the end of this application indicates you have read, understood, and accept the various statements related to application processing and employment.)

It is the policy of Bombardier Transportation (hereinafter referred to as the "Company") to provide equal opportunity in all its operations and in all areas of employment, and to assure that there shall be no discrimination against any employee or applicant for employment because of race, creed, ancestry, color, religion, sex, sexual orientation, gender identity or expression, national origin, citizenship, disability, genetic information, age, military service, status as a veteran, or other criteria which may be prohibited by local, state and federal legislation.

I certify that all of the information and answers provided in this Employment Application (and accompanying resume, if any) are true and correct. I authorize the Company to investigate all matters contained in this application. I release all references, former employers, or others from liability for damages due to providing information regarding me. I understand that any such false information or statement (in addition to any significant or material omissions) on this application may disqualify me from further consideration for employment or may result in the withdrawal of an offer of employment. I also understand that such false information or statement (or significant or material omission), if discovered at a later date, is justification for my dismissal and termination from employment.

I understand that any offer of employment may be contingent upon the satisfactory completion of a physical examination. I also understand that a job offer can be rescinded if, according to reasonable medical judgment, I cannot perform the essential functions of the job with or without reasonable accommodation, or pose a threat to the health or safety of others or me in the workplace. The results of this physical examination will be held in strict confidence, and the examination will be used only in a manner consistent with job relatedness and business necessity. I also understand that any offer of employment may be contingent upon the satisfactory completion of a test for controlled substances. Finally, I also understand that any offer of employment may be contingent upon my ability to be bonded (as applicable) and satisfactory reference or other background checks. I hereby consent to the aforementioned physical examination, substance screen, and reference or other background checks. I understand that if I refuse to undergo any requested physical examination or substance test or do not authorize reference or other background checks, I may not be considered for employment.

Except as required in the performance of my duties for the Company, I will not use or disclose to others information or data that is confidential to the Company, i.e., information that is not generally available to the public relating to the business of the Company including trade secrets as well as information pertaining to research/development, manufacturing, purchasing, financial accounting, engineering, marketing, merchandising, and selling activities. I also agree that all my papers, keys, identification cards, credit cards, tools, equipment or other property furnished by the Company or which I prepared or made, in whole or in part, at any time while employed by the Company, shall be the property of the Company and upon its request or the termination of my employment, I will promptly surrender such property to the Company.

I will promptly disclose and I hereby assign all rights to the Company to any inventions, improvements or ideas relating to products, machinery, processes or technology of the Company, which I made individually or jointly with others, including those made on my own time. However, this assignment of rights does not apply to inventions, improvements, or ideas for which no equipment, supplies, facilities, or trade secret information of the Company was used, and it does not apply to those inventions, improvements, or ideas that were developed on my own time if they do not relate to the Company's business, present or anticipated research and development, or work performed by me as an employee of the Company.

I also understand, acknowledge, and agree that if employed by the Company, my employment will be "at-will" and without a fixed term of employment and that either I or the Company may terminate the employment relationship at any time, with or without cause, and with or without notice. I also understand that this at-will employment relationship may not be changed, altered, or amended except in writing and signed by a duly authorized official of the Company. As such, I further acknowledge that my employment with the Company is not based on an employment contract and that neither this application nor any other policy, statement, handbook, memorandum, or other material that is provided to me is intended to serve as a written or implied contract of employment. Finally, I acknowledge that no employee or representative of the Company is authorized to enter into any oral contract of employment as to any term or condition of my employment.

SIGNATURE	DATE
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