Wilmorite Security, LLC

SECURITY OFFICER

APPLICATION FOR EMPLOYMENT

| * | Positions <u>may</u> be available at the following locations: Please place an "X" next to the location(s) you wish to be considered for. |
|----------|--|
| | Eastview Mall The Mall at Greece Ridge |
| | Marketplace Mall Pittsford Plaza |
| * | Application must be completed in its entirety |
| * | A copy of a High School, General Education (GED), or College diploma must accompany application |
| * | Most positions will include working every weekend, evenings, holidays and/or night shifts |
| * | Completed applications may be returned in person to the Security Manager at any of the above listed properties or to the Corporate Security Office located at: |
| | Wilmorite Security, LLC 1265 Scottsville Road Rochester, New York 14624 |

For assistance with the application process, contact (585) 464-9400 and ask for a Corporate Security representative.

Wilmorite Security, LLC

IMPORTANT PRE-APPLICATION ADVISORY

Effective January 1, 1994, Wilmorite Security, LLC, was in compliance with the Security Guard Act Amendment of 1993 to the New York State General Business law. This law in effect makes the Security Department a Security Guard Company. The impact of this change on current employees and applicants is outlined below. Please read this advisory carefully, as there are significant changes to past practices and requirements for becoming a registered security guard.

NYS requires that all security officer applicants must:

- 1. Be at least 18 years of age and provide verifiable documentation.
- 2. Be of good moral character and fitness
- 3. Not have been convicted of a serious offense verified by a fingerprint check.
- 4. Not have been declared by any court to be incompetent because of mental disease or defect.
- 5. Can perform the requirements of the job as described in the Wilmorite Security LLC, Security Officer "Job Specifications".
- 6. Not have been discharged from a correctional / law enforcement agency for incompetence or misconduct.
- 7. Have completed a NYS approved pre-assignment training course for a minimum of eight (8) hours.

Applicant for a NYS Security Guard license MUST have the following:

- 1. A completed Department of State application form, sworn to, or affirmed by the applicant, which will be completed by Wilmorite Security, LLC at the time of hire.
- 2. Color photographs (provided by Wilmorite Security, LLC, at the time of hire).
- 3. Employment history (references, unemployment statements or personal references) verified by Wilmorite Security, or by an authorized verification agency.
- 4. Certification that the applicant has completed the NYS approved eight (8) hour preassignment training course.
- 5. Fingerprints to be done by the current New York State contractor for the Division of Criminal Justice Services and Federal Bureau of Investigation. Fee to be paid by applicant at the time of service.

APPLICANTS THAT ALREADY HAVE NYS GUARD LICENSES

1. Applicants that already have NYS guard licenses will be asked to provide certificates of completion of the 8 Hour Pre-Assignment, 16 Hour on the Job Training course, and 8 Hour in service training. If applicant is unable to provide the necessary certificates, a request will be made to the Division of Licensing Services for a list of training classes completed. Applicants that are hired and found not to have the required training will be scheduled to complete the mandatory training.

All applicants will be required to have a onetime payroll deduction from their first paycheck for the cost of registering non-licensed personnel or reporting licensed personnel with the New York State Division of Licensing. (Fees set by New York State Division of Licensing.)

Applicants returning a Wilmorite Security, Security Officer Application must have the following:

- 1. A High School, General Education, (G.E.D.), or College Diploma.
- 2. Signed Wilmorite Security, LLC, and Job Specifications excerpt form.
- 3. A valid New York State security guard license and/or eight hour pre-assignment certificate.

If you have any questions regarding the procedures outlined in this advisory, please call the following numbers: **(585) 464-9400** and ask to speak with a representative of the Corporate Security Department.

Wilmorite Security

Job Specifications (Excerpt)

2.0 Title: Job Specifications – Wilmorite Security Personnel:

This job specification statement consists of the following numbered sections:

- 2.0 Title
- 2.1 Policy
- 2.2 Purpose
- 2.3 General Requirements
- 2.4 Physical Standards
- 2.5 Language and Writing Skills
- 2.6 Appearance Standards
- 2.10 Applicant Affirmation

2.1 Policy:

It is the policy of Wilmorite Security that there are well defined standards and requirements for employment that meet the needs of the organization and is in compliance with all Local, State and Federal Laws and Regulations.

2.2 Purpose:

The purpose of this statement of specifications and requirements is to clearly outline to all employees, applicants and candidates for promotion those attributes and abilities that will be required to perform their duties.

2.3 General Requirements: Wilmorite Security Officer:

A candidate must possess an operator's license valid for the State in which employed and demonstrate the ability to operate a motor vehicle in a safe and efficient manner. In addition to the physical requirements listed later in this document, the candidate must be able to confront combative individuals and if necessary engage in a lawful use of force to intervene in such activities as fights, scuffles and arrests. Pursuit and capture of wanted criminals in assistance to law enforcement may be required. All candidates for the position of Wilmorite Security Officer will be required to possess at a minimum, a High School Diploma or a General Education Diploma (G.E.D.).

In compliance states, employees will be required to maintain their security guard license or certificate once obtained from the issuing authority. If at any time the required security guard license or certificate is revoked, suspended or expired, the employee will not be permitted to work for the company in the capacity of a security guard. Timely renewals, address changes or other factors that may influence the validity of the license or certificate remain solely the

responsibility of the individual. In all cases any / all renewal documents should be submitted to the Security Manager upon receipt.

Candidates must be able to work a flexible schedule as assigned and in the best interest of the objectives and requirements of the company. All scheduling is subject to change in order to accommodate vacancies, special events, peak seasons and any other circumstances that arise. Shift assignments and promotions will be considered based on performance, ability, length of employment and site needs as well as personal attributes as evaluated by the site supervisory staff and Corporate Security.

2.4 Physical Requirements: Wilmorite Security Officer:

All candidates must be in good physical condition consistent with age and be free of any deformities or medical conditions that would preclude the performance of the duties as outlined in this policy to include:

- a) Eyesight Correctable to 20/40 and free of color blindness or any substantial restriction for operating a motor vehicle. Must be able to adjust to and work in various light conditions.
- b) Hearing Must be capable of hearing and understanding (aided or unaided), dialogue in conversational tones and levels, transmitted either in person or via radio or telephone. Must be capable of hearing and recognizing low, middle and high range sounds such as whistles, bells, buzzers, gongs and sirens such as those commonly used in alarm systems.
- c) Tour capability Must be able to perform walking tours both indoors and outside of the facility to which assigned. Must be able to ascend and descend stairs and fire escapes as well as both operable and not operable escalators. Must be able to run, ride elevators, climb ladders, and not be affected by heights such as looking down from rooftops, balconies or stairwells. Tours may require being alone for extended periods of time.
- d) Equipment Usage Must be able to carry and use a two-way radio, operate a base station radio, telephone and alarm equipment and controls. Must be able to monitor and skillfully operate complex Closed Circuit Television equipment without distraction. Must have the ability to adapt to and operate technological equipment such a computers, alarm enunciator panels and other similar equipment. Use of small tools is sometimes required. Must be able to carry and use a 20 lbs. fire extinguisher. Must be able to use vehicle opening and jump starting tools and equipment as trained.

2.5 Language and Writing Skills:

Must be able to read, write and speak the English Language. Must be able to prepare complex written reports and documents; comprehend and interpret complex verbal and written documents. Prepare legible and clear reports suitable for court purposes.

2.6 Appearance Standards:

Grooming - Employees are expected to maintain the highest standard of personal cleanliness and present a professional appearance at all times. All male employees will be clean-shaven. Beards and moustaches will be neatly trimmed. All officers will have their hairstyles arranged in a business-like manner and the hair will not touch or fall below the shirt collar.

Tattoos/Body Markings – Tattoos and/or body markings that could be offensive, disturbing, distracting or unprofessional will be covered by the security uniform and be inconspicuous. Wilmorite Security reserves the right to ask an employee to cover any tattoos and/or body markings that are deemed to be inappropriate for viewing by the public and other employees.

Uniform – The Wilmorite Security uniform will be worn as presented during the process of Field Training in compliance with established policies and regulations as defined by Corporate Security. Undershirts are optional however, if worn, will be the issued navy blue in color undershirts. For safety and appearance reasons, jewelry such as ear rings, studs, facial and tongue piercing will not be worn while on duty.

2.10 Applicant Affirmation: To be signed and witnessed at the time of turning in employment application.

As an applicant for employment with Wilmorite Security LLC, or as an employee receiving this statement of policy, my signature below will act as acknowledgement that I have read this statement of specifications and requirements. I am proceeding with the application process with full knowledge of the requirements and expectations of the company. I also understand that if conditional employment is offered, I will be required to pass a medical screening and drug test. The company physician may verify health information and based on the findings may approve or disqualify. Additionally, I agree and understand that I will be required to submit to a background investigation which will require information of a personal nature to determine my suitability for employment. I authorize this information to be disseminated to company authorized agency for processing and further understand that the information obtained from this background investigation may be cause to either continue or discontinue the employment process.

| Signature | Date |
|-----------|------|
| | |
| Witness | Date |



Wilmorite Security, LLC.

| Please Print Clearly APPLICATION FOR EMPLOYMEN |
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Please Answer All Questions. Resumes are not a substitute for a completed application.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON. WITH OR WITHOUT CAUSE OR NOTICE.

| FOR AINT KEASON, WI | TH OR WITHOUT CAUSE OR NO | JIICE. | | | |
|------------------------|---|------------------------|-----------------------|-------------------------|--------------|
| Name | | | | | |
| Telephone Number (_ |) | Alternate/Cell | ular Telephone Nur | mber () | - |
| Present Address | | | | | |
| | Street, Ap | artment, or Unit Numbe | r | | _ |
| City | ,,,,, State | | | _ | |
| Email Address | | | | | |
| Desired Hourly Rate | | | | | |
| Full-time Overnigi | hts \square Part-time \square Specify Day | rs/Hours Available F | or Part Time: | | |
| Are you willing to wor | k overtime? Yes □ No □ | Date on which you | u can start work if h | ired | |
| Driving is a requireme | nt for the position; do you hav | e a valid New York | State Driver's Licen | se? Yes 🗆 1 | No 🗆 |
| | pplied for employment with th | | | | ? |
| Have you ever been e | mployed by this Company? Ye f employment, location, and re | es 🗆 No 🗆 | | | |
| Education | School Name and Location (Address, City, State) | Course of Study | Graduate? Y or N | # of Years Completed | Degree/Major |
| High School | | | | | |
| College | | | | | |
| Bus./ Tech./Trade | | | | | |
| Or Post College | | | | | |

If applicable, list below any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of an assumed name, nickname, etc.

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Do not answer "see resume."

| Employer Name | Address | Type of | f Busines. | s | | |
|---|---|-----------------|----------------------------------|--|----------------------------|--------|
| Telephone () | _ Dates Employed From _ | | /_ | To | / | / |
| ob Title | Duties | | Part | time or Fu | ll Time | |
| Supervisor's Name | May we contact? Yes | □ No I | f No, wh | y not? | | |
| Reason for Leaving | | | | | | |
| What will this employer say was the | e reason your employment was terminated | d? | | | | |
| How much notice did you give whe | n resigning? If none, explain | | | | | |
| 2. | | | | | | |
| Employer Name | Address | | Туре о | f Business | | |
| Felephone () | _ Dates Employed From _ | / | / | To | /_ | / |
| ob Title | Duties | | Par | t Time or F | ull Time | |
| | | | | | | |
| Supervisor's Name | May we contact? Yes | □ No I | f No, why | / not? | | |
| Supervisor's NameReason for Leaving | | | | y not? | | |
| Reason for Leaving | | | | | | |
| Reason for Leaving | e reason your employment was terminated | d? | | | | |
| Reason for Leaving | | d? | | | | |
| Reason for Leaving What will this employer say was the How much notice did you give when B | e reason your employment was terminated n resigning? If none, explain | d? | | | | |
| Reason for Leaving What will this employer say was the | e reason your employment was terminated | d? | | | | |
| Reason for Leaving What will this employer say was the How much notice did you give when B | e reason your employment was terminated not resigning? If none, explain | d? | Туре ој | f Business | | |
| Reason for Leaving What will this employer say was the low much notice did you give when as Employer Name | e reason your employment was terminated n resigning? If none, explain Address Dates Employed From | d? | Type o | f Business | / | |
| Reason for Leaving What will this employer say was the low much notice did you give where Employer Name Telephone () | e reason your employment was terminated not resigning? If none, explain | d?/ | Type oj | f Business To t Time or F | /_ | |
| Reason for Leaving What will this employer say was the low much notice did you give when say was the low m | e reason your employment was terminated not resigning? If none, explain | d?/ | Type of | f Business To t Time or F | /_ | |
| Reason for Leaving What will this employer say was the downwith notice did you give when so the second sec | e reason your employment was terminated n resigning? If none, explain Address Dates Employed From Duties May we contact? □ Yes | d?/_ | Type of | f Business To t Time or F | / | |
| Reason for Leaving What will this employer say was the downwith notice did you give when say was the following propers of the following p | e reason your employment was terminated in resigning? If none, explain | d?/_ | Type of | f Business To t Time or F | / | |
| Reason for Leaving What will this employer say was the downwith notice did you give when so the second sec | e reason your employment was terminated in resigning? If none, explain | d?/_ | Type of | f Business To t Time or F | / | |
| Reason for Leaving | e reason your employment was terminated in resigning? If none, explain | d?/ | Type of American Part of No, why | f Business To t Time or F y not? | ull Time | times? |
| Reason for Leaving | e reason your employment was terminated in resigning? If none, explain | d?/_ / d? | Type of | f Business To t Time or F y not? If Yes, ho If Yes, ho | w many w many w many | |

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

| NAME | POSITION | COMPANY | WORK RELATIONSHIP (i.e., supervisor, co- worker) | TELEPHONE |
|------|----------|---------|--|-----------|
| | | | | |
| | | | | |

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

| NAME | OCCUPATION | ADDRESS | TELEPHONE | NUMBER OF YEARS KNOWN |
|------|------------|---------|-----------|--------------------------|
| | | | | |
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APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's Policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT EXPRESS OR IMPLIED WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OR THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the Company or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law. If applicable and allowed by law, I will receive separate written notification regarding the Company's intent to obtain "consumer reports."

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. Further, if hired, I authorize the company to provide truthful information concerning my employment to future employers and hold the company harmless for providing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF ONE YEAR. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

I UNDERSTAND THAT AS APPLYING FOR A SECURITY GURAD POSITION, I MUST COMPLY WITH ALL OF THE REGULATIONS OUTLINED IN THE NYS SECURITY GUARD ACT OF 1994.

DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THIS APPLICATION.

| Applicant Signature | Date | // | / |
|----------------------------|------|----|---|
| | | | |