

# QUANTUM3D, INC. & ITS SUBSIDIARIES

## EMPLOYMENT APPLICATION

*EOE*

### Corporate Headquarters

5400 Hellyer Avenue  
San Jose, CA 95138  
Main (408) 600-2500  
Fax (408) 600-2606

Thank you for your interest in Quantum3D & Its Subsidiaries. As an applicant for employment, please be advised that **Quantum3D or its affiliated companies does not discriminate in hiring on the basis of race, color, religion, age, sex, marital status, sexual orientation, national origin, physical or mental disability, or veteran status or any other classification protected by applicable law.** If hired, on your first day of employment you must present proof of authorization to work in the United States. Failure to provide proper identification may delay placement on payroll and ultimately result in mandatory termination. Persons under 18 years of age must show a work permit or other proof of eligibility to work. We regret that we cannot respond to every application. You will be contacted if your qualifications best match our employment needs. If employed by Quantum3D and/or its subsidiaries, employment and compensation can be terminated, with or without cause and with or without notice, at any time, at the option of the company or yourself. Quantum3D and its subsidiary are “at-will” employers.

While an attached resume is welcome, please note that it acts only as a supplement to this application. Please complete each section of this application in full.

PERSONAL INFORMATION	Name		Date (mm/dd/yyyy)	
	Current Address		Home Phone Number	( )
			Alternate Phone Number	( )
	Are you prevented from being lawfully employed in the United States?			[ ] Yes [ ] No
	Are you 18 years of age or older?			[ ] Yes [ ] No
	For reference purposes, have you worked or attended school under a former name? If yes, please list former name:			[ ] Yes [ ] No
	Have you ever applied to Quantum3D and/or CG2 before? If yes, when?			[ ] Yes [ ] No
	Have you ever worked at Quantum3D and/or CG2 before? If yes, when?			[ ] Yes [ ] No
	Are any relatives currently employed here? If yes, give full name:			[ ] Yes [ ] No
	Are you able to perform the essential functions of the job you are applying for? If no, what accommodation would assist you?			[ ] Yes [ ] No
How did you hear about the company?				
Have you ever been convicted of a felony? If yes, please state the nature of the crime(s), the date of conviction(s) and disposition of the case(s).			[ ] Yes [ ] No	
<i>(Note: Evidence of an arrest or conviction record will not necessarily disqualify you from employment.)</i>				

EMPLOYMENT PREFERENCE					
<b>OBJECTIVES</b>	Position Desired			Salary Desired	
	Are you available for work on Saturdays?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you available for work on Sundays?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Are you willing to relocate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you available to travel?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Type of employment desired:	Full-time <input type="checkbox"/>	Part-Time <input type="checkbox"/>	Temporary <input type="checkbox"/>	
	If hired, when can you start?				

Please list one personal and three professional references. A personal reference is someone who is neither a relative nor a former employer, and who has known you for at least three years. A professional reference is someone with whom you have had a business relationship, and whom you feel has significant knowledge of your work experience.

REFERENCES					
<b>REFERENCES</b>	Name	Address	Phone	Occupation	Years Known

<b>EMPLOYMENT HISTORY</b> ( <i>please list employment for the last 10 years</i> )				
<b>EMPLOYMENT HISTORY</b>	Employer		Phone Number ( )	
	Address		Start Date (month/year)	
			End Date (month/year)	
	Supervisor Name and Phone Number		Starting Salary	
			Ending Salary	
	May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Last Bonus or Incentive	
	Title or Position			
	Duties and Responsibilities			
	Reason for Leaving			
Employer		Phone Number ( )		
Address		Start Date (month/year)		
		End Date (month/year)		
Supervisor Name and Phone Number		Starting Salary		
		Ending Salary		
May we contact this employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Last Bonus or Incentive		
Title or Position				
Duties and Responsibilities				
Reason for Leaving				

<b>EMPLOYMENT HISTORY (continued)</b>				
<b>EMPLOYMENT HISTORY</b>	Employer		Phone Number ( )	
	Address		Start Date (month/year)	
			End Date (month/year)	
	Supervisor Name and Phone Number		Starting Salary	
			Ending Salary	
	May we contact this employer?	[ ] Yes [ ] No	Last Bonus or Incentive	
	Title or Position			
	Duties and Responsibilities			
	Reason for Leaving			
Employer		Phone Number ( )		
Address		Start Date (month/year)		
		End Date (month/year)		
Supervisor Name and Phone Number		Starting Salary		
		Ending Salary		
May we contact this employer?	[ ] Yes [ ] No	Last Bonus or Incentive		
Title or Position				
Duties and Responsibilities				
Reason for Leaving				

Have you ever been involuntarily terminated from any job?	[ ] Yes [ ] No
If yes, please indicate the job and circumstances:	
Please fully explain any gaps in your employment history.	

EDUCATION				
School	Name, City, State	Number of Years Completed	Did you Graduate?	Course of Study
High School			[ ] Yes [ ] No	
Junior College			[ ] Yes [ ] No	
College/University			[ ] Yes [ ] No	
Graduate/Professional			[ ] Yes [ ] No	
Other			[ ] Yes [ ] No	

SKILLS / ABILITIES			
Which types of computers are you able to operate?		[ ] IBM/Compatible	[ ] Macintosh
		[ ] Neither	[ ] Other
Please indicate software with which you are proficient:		1.	2.
		3.	4.
5.	6.	7.	8.
9.	10.	11.	12.
Typing Skills: WPM_____			
Please list any foreign language in which you are fluent.		Written:	
		Verbal:	
Please list any other skills, licenses, certificates, or other qualifications or accomplishments that may be job related or valuable to the job or company:			

**EMPLOYMENT RELATIONSHIP AGREEMENT  
AND VERIFICATION STATEMENT**

**Please read carefully, initial each paragraph and sign and date below.**

I hereby certify, under penalty of perjury under the laws of the State of California, that the information given in this application and attached resume is accurate, true, and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misrepresentation of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application, or for immediate discharge if I am employed, regardless of time elapsed before discovery and regardless of my job performance. \_\_\_\_ **Initial**

I hereby authorize and hold harmless Quantum3D its agents, representatives, or affiliated companies (collectively referred to as Quantum3D), to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize my former employers to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release and hold harmless Quantum3D, my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. \_\_\_\_ **Initial**

I understand that if I am hired, I will be an **at-will** employee. This means that employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of Quantum3D or myself. This agreement concerning at-will employment is intended to be the final and complete expression of the agreement between Quantum3D and I as to the nature of our employment relationship, and it cannot be changed at any time during my employment except by a written contract signed by myself and the Board of Directors of Quantum3D I agree that no statements, promises, disciplinary systems, statements in the Employee Handbook, awards or recognitions, policies, conduct of any officer or employee of the bank including, without limitation, the award of bonuses, salary increases, promotions, raises, performance reviews, offer letters, memoranda, or other Quantum3D communication verbal or written, or any other event or representation will be effective to change the at-will nature of my employment with Quantum3D. This at-will statement shall be interpreted consistently with all other statements of at-will policy that are contained in the Employee Handbook or other at-will agreements, statements, or written policies of Quantum3D. \_\_\_\_ **Initial**

I certify that I have read, understand, and agree to the above.

**Signature:**

**Date:**

**CERTIFICATION**

## VOLUNTARY SELF IDENTIFICATION

*At Quantum3D and CG2 we believe in, and are committed to, the goal of equal opportunity. The following information is requested for the purpose of preparing periodic reports related to government requirements. Federal law requires the information to be kept confidential and to be used for statistical purposes only. We encourage you to provide this information and your cooperation would be greatly appreciated, but the decision concerning your employment will not be adversely affected should you prefer not to complete this section.*

Date		Social Security Number	
Name	(Last)	(First)	(Middle)
Sex	<input type="checkbox"/> Male	<input type="checkbox"/> Female	

### RACE/ETHNIC CATEGORY

*Please mark the race/ethnic description that best describes the group to which you belong. If you feel that more than one applies, mark the one that is most important to you.*

**Black** (Not of Hispanic Origin) – All persons having origins in any of the Black racial groups of Africa.

**Asian or Pacific Islander** – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This are includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

**American Indian or Alaskan Native** – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

**Hispanic** – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

**White** (Not of Hispanic Origin) – All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

### VETERAN STATUS

*Please mark the Veteran status category that best describes your situation. You may leave this blank if none apply or if you choose not to identify.*

Disabled Vietnam Era Veteran

Vietnam Era Veteran ( 08/05/1964 – 05/07/1975)

Disable Veteran (other than a Vietnam Era Veteran)

### SOURCE OF REFERRAL

Employee Referral  
Name of Employee\_\_\_\_\_

Advertisement  
Name of Publication\_\_\_\_\_

Trade/Vocation School

Job Fair

Walk-in

College or University

Other source (please specify)

**For what position are you applying?**

VOLUNTARY SELF IDENTIFICATION

# **Background Check Authorization Form**

I voluntarily authorize Quantum3D and its Subsidiaries and/or an investigative agency engaged by the company to conduct an investigation of me as a condition of my employment or continued employment at Quantum3D or its subsidiary or affiliate of Quantum3D. I understand that the investigation of me may include obtaining information about my character, general reputation, professional qualifications and standing, mode of living and credit worthiness. The information will be used to make decisions about my employment, which may include hiring, firing, promotion or assignment.

The investigation will be conducted by an outside agency. However, I understand that the outside agency may obtain information it deems appropriate from various sources including, but not limited to, the following: credit reporting agencies, current and past employers, criminal conviction records, Department of Motor Vehicle records, military records, school records, and professional and personal references. I authorize, without reservation, any individual, corporation or other private or public entity to furnish the Company and the outside agency with this personal information.

By checking this box, I indicate that I wish to receive a free copy of the report.

I understand that I have the right to inspect the report at the investigative agency's offices during normal business hours and after reasonable notice to the agency. I can also inspect the report by certified mail or by telephone. I must show proper identification and pay for any costs involved with the inspection. I have the right to be accompanied by one other person who must also show proper identification. The investigative agency will explain any of the information in the report and will provide a written explanation of any coded information.

I understand that a "Summary of Your Rights Under the Fair Credit Reporting Act" is available for my review at <http://www.ftc.gov/bcp/online/edcams/fcra/summary.htm>.

This authorization and release, in original, faxed, photocopied or electronic form, will be valid for this and any future reports and updates that may be requested by the Company.

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Dated:

Applicant's Signature

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Print Name

# EXPORT CONTROL COMPLIANCE QUESTIONNAIRE

Quantum3D & its subsidiaries work with technologies subject to U.S. export control regulations. Under these regulations it may be necessary for the company to obtain a U.S. government export license prior to releasing its technologies to certain persons. The decision whether or not to file or pursue an export license application is at the Company's sole election.

The following questions are being asked to assess your country of chargeability for export control screening purposes only. This information will not be used for any improper purpose.

**1. ARE YOU ONE OF THE FOLLOWING:**

- Citizen or National of the United States.
- U.S. Lawful Permanent Resident.
- Person granted Refugee status.
- Person granted Asylum.
- Temporary Resident (Granted under Amnesty or Special Agricultural Worker provisions. The term "Temporary Resident" does not include persons in nonimmigrant status such as H-1B, L-1, F-1, etc.)

**Yes**  **STOP.** Proceed directly to Signature Section below.

**No**  Continue to Question 2.

**2. HAVE YOU EVER ACQUIRED CITIZENSHIP, NATIONALITY, OR PERMANENT RESIDENT STATUS IN A COUNTRY OTHER THAN YOUR PLACE OF BIRTH?**

**Yes**  Please provide details (country(s), type of status, date of acquisition):

\_\_\_\_\_

**No**  Please state your country of birth:

\_\_\_\_\_

**3. HAVE YOUR EVER RELINQUISHED, ABANDONED, OR LOST CITIZENSHIP, NATIONALITY OR PERMANENT RESIDENCE IN ANY COUNTRY, INCLUDING YOUR COUNTRY OF BIRTH?**

**Yes**  Please provide details (country(s), status relinquished/abandoned/lost, date of relinquishment/abandonment/loss):

\_\_\_\_\_

**No**  Proceed to Signature Section.

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## SIGNATURE SECTION

I understand that Quantum3D and its subsidiaries reserve the right to inquire further on any matter related to the company's export compliance obligations. I certify that the foregoing answers are true and correct to the best of my knowledge and belief.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_