

**APPLICANT NOTICE  
DISPUTE RESOLUTION PROGRAM**

By my submission of this application to you for employment, I understand that any legal dispute related to this application for employment or any legal dispute during any subsequent employment with the Company will be conducted under its Dispute Resolution Program.

The Dispute Resolution Program is a multi-step process, which requires that I provide notice to the Company of any issue regarding this application for employment or any subsequent employment. I understand that the last and final step under the Dispute Resolution Program is a requirement of mandatory and binding arbitration, which will be conducted under the American Arbitration Association’s “Employment Arbitration Rules and Mediation Procedures.”

The types of claims covered under the program are all legal claims, including: claims for wages or other compensation; claims for breach of any contract, covenant or warranty (expressed or implied); tort claims (including, but not limited to, claims for physical, mental or psychological injury, without regard to whether such injury was sustained in the course and scope of employment); claims for wrongful termination; sexual harassment; discrimination (including, but not limited to, claims based on race, sex, religion, national origin, age, sexual orientation, medical condition or disability whether under federal, state or local law); claims for benefits or claims for damages under any employee benefit program sponsored by the Company (after exhausting administrative remedies under the terms of such plans); “whistleblower” claims under any federal, state or other governmental law, statute, regulation or ordinance; claims for retaliation under any law, statute, regulation or ordinance, including retaliation under any workers compensation law or regulation; and claims for a violation of any other non-criminal federal, state or other governmental law, statute, regulation or ordinance.

I agree, in consideration of the Company’s consideration of my application of employment or any subsequent employment of me by the Company, that I will follow the Company’s Dispute Resolution process, which includes mandatory binding arbitration.

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date