8. **Termination** - You shall give a minimum of ten (10) business days notice should you decide to terminate your position with AEROTEK. You understand that the length of assignment is subject to the discretion and needs of the Client and, therefore, a five day notice from AEROTEK may not be possible and AEROTEK is not required to provide such notice. Upon termination, and to the extent permitted by applicable law, you acknowledge and agree that any amounts owed by you to AEROTEK will be deducted from any remaining wages owed to you and refunded to AEROTEK.

9. **Notification of Completion of Assignment**- You agree that upon completion of an assignment with Client, you will notify AEROTEK that you have finished the assignment and confirm your availability for work, regardless of who originally notified you that the assignment was ending. You will contact AEROTEK within one business day after completion of the assignment between the hours of 8:00 a.m. and 5:00 p.m. If you do not contact AEROTEK as stated in this paragraph, AEROTEK will assume that you are unavailable for work. You understand that failure to contact AEROTEK upon completion of an assignment may affect your ability to receive unemployment benefits.

10. **Optional Health Insurance** - You are eligible to participate in the contributory AEROTEK Health Insurance Program at your option. You acknowledge that you have received an election form for the purpose of electing to participate or not participate in the Program. Should you elect to participate in the program, you must check the appropriate box on the election form and must submit the necessary applications. By electing to participate in the program, you authorize AEROTEK to deduct your portion of the insurance premium directly from your paycheck. Should you elect not to participate, you must check the appropriate box on the election form. You may be required to furnish evidence of insurability should you later apply for admission to the program.

11. **Acknowledgment of Employment Relationship** - In addition to the rules, regulations and policies of AEROTEK, you agree to be bound by any applicable rules, regulations or policies established by the Client wherever you perform services under this agreement. You recognize and agree that you are an employee of AEROTEK and not an employee of the Client, and you will look solely to AEROTEK for all employee benefits in connection with your employment under this agreement. You hereby waive any right you have or may have against the Client for benefits arising out of or resulting from employment hereunder, including, without limitation, rights under any medical/benefit plan, pension plan or vacation/holiday plan.

12. **Limitation of Liability** - To the extent permitted by law, you, on your own behalf and on behalf of anyone claiming by or through you, waive any and all rights you have, or may have, to claim or assert a claim, suit, action or demand of any kind, nature or description, including without limitation, claims, suits, actions or demands for personal injury or death whether arising in tort, contract or otherwise, against Client or Client's customers, agents, officers, directors, or employees, resulting from or arising directly or indirectly out of your employment with AEROTEK. You recognize and agree that AEROTEK provides workers' compensation coverage for such things as on-the-job injuries or occupational diseases incurred while on assignment for AEROTEK, and you agree to look solely to AEROTEK and/or its insurer for damages and/or expenses for such injury, illness or other claims incurred while on assignment. In furtherance of the foregoing and in recognition that any work related injuries which might be sustained by you are covered by state Workers' Compensation statutes, and to avoid the circumvention of such state statutes which may result from suits against the Clients of Aerotek based on the same injury or injuries, and to the extent permitted by law, YOU HEREBY WAIVE AND FOREVER RELEASE ANY RIGHTS YOU MIGHT HAVE to make claims or bring suit against the Client of Aerotek for damages based upon injuries which are covered under such Workers' Compensation statutes. You agree to notify AEROTEK if you believe that there are any unsafe conditions at the Client worksite or facility.

If you accept this conditional offer in accordance with its stated terms, please indicate your acceptance by signing your name where indicated below and returning the signed copy to: AEROTEK, at the following address: 2221 Killebrew Dr. Bloomington, MN 55425, prior to commencing work.

Accepted By:

Rodney L. Larson
(Contract Employee)

Rodney L. Larson May 10, 2013
(Contract Employee Signature) (Date)

478-52-1117
(SS#)

Accepted By: Aerotek CE, **A division of Aerotek, Inc.**

Mike Shier
(AEROTEK, Inc. representative)

(AEROTEK, Inc. representative Signature)
(Date)