Application for Employment

An Equal Opportunity Employer

Position(s) Applied For	Date of Application								
Name	Ema	il:							
Address	City	State	Zip code						
Telephone Number ()	Social Security Nun	nber							
Can we contact you at work?] Yes □ No						
If yes, work number and best time to call	())							
Are you related to any person employed by the Con	npany or its affiliates?		🗆 Yes 🗆 No						
If yes, indicate Name	Relationship	Department_							
Have you ever been or are you currently employed	by the Company or its affiliates?		□ Yes □ No						
If yes, give datesfr	rom	to							
Are you legally eligible for employment in this country (Proof of U.S. Citzenship or immigration status will be required upon			I Yes □ No						
Date available for work									
Type of employment desired ☐ Full Time	☐ Part Time ☐ Temporary								
Will you relocate if job requires it?□	I Yes □ No Will you travel i	if job requires it?	🗅 Yes 🗆 No						
Will you work overtime if required?			Yes 🗆 No						
Have you been convicted of a crime in the last disclosure by you is to your advantage as you to, age of offense(s) and recency of offense(s) taken into account. However, failure to admit of yes, please explain:	r record does not constitute an autom as well as the relationship between convictions will result in disqualification	natic bar to employment. Factories the offense(s) and the job(s) on of your application for one	ctors such as, but not limited for which you apply will be						
Driver's license number (if job related)	Si	tate Expiration D)ate						
Type of Driver's License: ☐ Class A ☐ Class B	☐ Class C ☐ Class M ☐ Class A Co	mmercial 🔲 Class B Commercia	I Class C Commercial						
Can you perform the essential functions of t no, please explain:	he position you are applying for?								

Employment History

Employer	(-	Telephone		Dates Employed		Summarize the nature of the
Limployer		reiepiione		From	То	work performed and job responsibilities
Address						
Job Title					ate/Salary	
					arting	
Immediate Supervisor and Title				\$	Per	
Reason for Leaving				Hourly R	ate/Salary	
				Fi	inal	
				\$	Per	
May we contact for reference?	☐ Yes	☐ No	☐ Later			
Employer		elephone		Dates Employed		Summarize the nature of the
				From	То	work performed and job responsibilities
Address						
Job Title			3		ate/Salary	
					irting	
Immediate Supervisor and Title				\$	Per	
Reason for Leaving				Hourly Ra	ate/Salary	
12					inal	
May we contact for reference.	☐ Yes	☐ No	☐ Later	\$	Per	
Employer		elephone	_ Late:	Dates Employed		Summarize the nature of the
- Improyer		Тегерпопе		From	То	work performed and job responsibilities:
Address						
Job Title				Hourly Ra	ate/Salary	
				Sta	rting	
Immediate Supervisor and Title	,			\$	Per	
Reason for Leaving				Hourly Ra	ate/Salary	
				Fi	nal	
				\$	Per	
May we contact for reference?	☐ Yes	☐ No	☐ Later			
Employer		elephone		Dates Employed		Summarize the nature of the
				From	То	work performed and job responsibilities:
Address						
ob Title					ate/Salary	
			rting			
Immediate Supervisor and Title				\$	Per	
Reason for Leaving				Hourly Ra	ate/Salary	
J				Fi	nal	
Nay we contact for reference?	☐ Yes	☐ No	☐ Later	\$	Per	

Skills and Qualifications Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with our company (include computer skills, typing speed, specialized equipment, tools, heavy equipment, etc.).

E	du	ca	ti	0	n	al	B	a	ck	(q	r	O	u	n	C	
_				_			_				_	_				_

List last three (3) schools attended, starting with ny. D . Grade Point Average or Class Rank and E			y (if applicable	е).	te degree or diplo	ma earned,	
A. School	B. No. Years C.		D. GPA Degree Class Rank		E. Major	F. Minor	
Language	Speak Son	ne	Speak	Fluently	Read	Write	
66-							
ist any foreign language(s) you know and chec	k the boxes that des	cribe your	skill level.				
References List name and telephone number of three busine	ess/work references	that are no	ot related to yo	ou and are	not previous sup	pervisors.	
Name				Telephone		Years Know	
t is understood and agreed upon that any misre his application and/or separation from the Comp o secure additional information about me, if job reformation and all other persons, corporations of	any if I have been en elated. I hereby relea	mployed. I ase from lia	give the Com ability the Com	pany the r pany and	ight to investigate	all references a	
also understand that as a condition of employn neestigation, credit check, pre-employment prequal Opportunity Employer. The Company does of limiting or excusing any applicant's considerate the conclusion of this will be necessary to fill out a new application.	nysical and/or a post s not discriminate in e tion for employment	t-employm employmer on a basis	ent offer drug it and no ques prohibited by	-alcohol se stion on thi local, stat	creening test. T s application is us e, or federal law.	The Company is sed for the purpo This application	
The following are the agreements I have with ired by	my present or a pr	rior emplo	yer which ma	ay affect r	ny work-related	activities if I a	
Company:) Covenant not to compete (regardless of whet lon-solicitation or non-recruitment agreement*) Confidentiality and/or non-disclosure agreeme		es it applie	s to any emplo	oyment wit	h Company or no	ot)* ()	
) Are you registered or do you have a contract		ency? If s	o, please list:		* () None		
) Other Please Provide a Copy of the Agreement at the Ti	ne of Your Interview				() None		
further understand that I am not to disclose to present or a prior employer and that I am not to present or a prior employer. I understand that employment at any time, with or without cause authority to make any assurances to the contrare employment with Company will be at-will.	o engage in any cor just as I am free to and without prior n	nduct whic resign at notice. I ur	h would violate any time, the aderstand that	te an agre Company t no repre	ement, if any, be reserves the rig sentative of the	tween me and ht to terminate Company has	
Required Signature of Applicant		Б	ate				

AUTHORIZATION TO OBTAIN CONSUMER REPORTS AND INVESTIGATIVE CONSUMER REPORTS AND RELEASE OF LIABILITY

By signing below, you authorize WILKS BROTHERS (the "Company") to obtain, and direct the consumer reporting agency to furnish to the Company, the consumer reports and investigative consumer reports described in the Notice Regarding Consumer Reports and Investigative Consumer Reports (the "Notice") provided to you. You also authorize and consent to the Company disclosing those consumer reports or investigative consumer reports to its employees, representatives, and affiliates. To ensure that the consumer reporting agency obtains information pertaining to you and not to another person with the same or a similar name, please provide all of the information requested below. This information will be provided ONLY to the consumer reporting agency, and will NOT be used by the Company for any other purpose. Please complete all of the requested information.

Name – Last		Fir	rst		M.I.		
Current Address – Street			ty	State	Zip Code		
Since (Mo/Yr.):							
Social Security Number			List Any Other S Used	Numbers You Have			
Driver's License Number	State of Issuance	e	Date of Birth ¹				
Previous Home Addre	esses for the Past Sever	n Ye	ars – Mo/Yr., Stree	et, City, State, 2	Zip Cod	e:	
(Attach additional sho	eet if necessary)						
List Any Other Name	s You Have Used (Incl	ludin	g Your Maiden Na	ame, If Applica	ble)		
Company, the consumer rand in consideration of to purposes, including my extent allowed by law, the members, shareholders, or provides information injury or damage of any FROM ITS OR THEIR as a result of the creation summary of my rights upon the constant of the creation in the constant of the creation in the creatio	he Company's conside suitability for continuous Company, any affiliare representatives, agents about me, including LIA NEGLIGENCE, GRO on, acquisition, use, or nder the Fair Credit Research suitable su	consideration ed en ed e	umer reports describ on of me for hire an mployment, I relea entities, and it's on d employees, and a consumer reportin ITY FOR ANY IN. NEGLIGENCE, Of semination of any	ned in the Notice od/or, if I am h use and hold ha r their officers, my individual o ng agency, from JURY OR DAN R OTHERWIS such informati	e. In conired, for armless, directon armity n all lial MAGE FE, that long. I ha	nnection with other lawful to the fullest rs, managers, that requests bility for any RESULTING I may sustain ave received a	
voluntarily execute this A	utnorization.						
Signature		Da	ite				
¹ The consumer reporting agency	requires this information to ver	rify cr	iminal history (if any). W	ILKS BROTHERS	is an equal	opportunity	

employer and does not discriminate against applications or employees on the basis of age.