

Southwest Drilling Services, Inc. P.O. Box 2322 Christianburg, VA 24068 Phone: (276) 870-6140

## APPLICATION FOR EMPLOYMENT

Vame			Date .	
Address	Street City			
	Street City	State	Zip	
elephone number	Are you over 18 ye	ears old? 🗆 Yes 🗀	No	
are you authorized to wor	rk in the U.S. on an unrestricted basis? $\square$ Yes	□ No		
ave you worked here be	fore?   Yes   No			
lave you been told the esunctions of the job? $\Box$	sential functions of the job or have you been sho Yes $\square$ No	own a copy of the job d	escription listing th	e essential
Can you perform these ess	sential functions with or without reasonable acco	ommodation?   Yes	□ No	
are you willing to work o	overtime as required?   Yes   No			
lave you ever been convi	icted of a felony?   Yes   No (Convictio	n will not necessarily d	isqualify an applica	nt for
lave you ever been convi	icted of a felony?   Yes   No (Convictio	n will not necessarily d  YEAR  GRADUATED	isqualify an applica	DIPLOMA/ DEGREE
lave you ever been convi mployment.) If yes, desc	icted of a felony?   Yes   No (Conviction ribe conditions:	YEAR	MAJOR	DIPLOMA
lave you ever been convi mployment.) If yes, desc EDUCATION	icted of a felony?   Yes   No (Conviction ribe conditions:	YEAR GRADUATED	MAJOR	DIPLOMA
lave you ever been convi mployment.) If yes, desc EDUCATION High School	icted of a felony?   Yes   No (Conviction ribe conditions:	YEAR GRADUATED	MAJOR	DIPLOMA
Have you ever been convimployment.) If yes, desc  EDUCATION  High School  College/Univ.	icted of a felony?	YEAR GRADUATED	MAJOR	DIPLOMA
Have you ever been convimployment.) If yes, descent between the property of th	icted of a felony?   Yes   No (Conviction or its conditions:  NAME & LOCATION OF SCHOOL  In this condition of the condition of the conditions of the condition	YEAR GRADUATED DO NOT COMPLETE	MAJOR SHADED AREAS ould especially fit y	DIPLOMA/ DEGREE

(OVER)

WORK HISTORY		May we contact your present employer?	□ Yes □ No				
Most Recent Employer		Address	Telephone				
Date Started	Starting Salary: \$ Per	***************************************	Starting Position				
Date Left	Salary on Leaving: \$	Per	Position on Leaving				
Name and Title of Supervisor							
Description of Duties			Reason for Leaving				
Previous Emplo	yer		Address	Telephone			
Date Started	Starting Salary: \$ Per		Starting Position				
Date Left	Salary on Leaving: \$	Per	Position on Leaving				
Name and Title of Supervisor							
Description of I	Outies		Reason for Leaving	The state of the s			
Previous Emplo	yer		Address	Telephone			
Date Started	Starting Salary: S Per		Starting Position				
Date Left	Salary on Leaving: \$	Per	Position on Leaving				
Name and Title of Supervisor							
Description of Duties			Reason for Leaving				
Previous Emplo	yer		Address	Telephone			
Date Started	Starting Salary: \$ Per		Starting Position				
Date Left	Salary on Leaving: \$	Per	Position on Leaving				
Name and Title of Supervisor							
Description of Duties			Reason for Leaving				
APPLICANT'S CERTIFICATION AND AGREEMENT  I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed false statements, omissions or misrepresentations may result in my dismissal. I authorize the Company to make an investigation of any of the facts set forth in this application.  I understand that the employer may give me a conditional job offer, following which I may be required to furnish information regarding medical condition and history and any information regarding any pre-existing permanent physical impairment. I further understand that once given a conditional job offer, I may be required to submit to pre-employment testing for the illegal use of drugs.							
Date Applicant's Signature							

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