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APPLICATION FOR EMPLOYMENT

Position Applied For: _____

Date: _____

Name: _____

I. PERSONAL DATA:

Last Name First Name Middle Name Social Security Number

Street Address City State Zip Code Telephone Number

Salary Expectation: _____ When will you be able to start work? _____

When is your birthday: ____/____/____

Note: This information will be used only for child labor law purposes.

Are there any days, shifts or house you will not work? Y N If any, please explain below:

Are you available for out of town work? Y N

Will you work overtime if required? Y N

Have you taken any illegal drugs in the last 30 days? Y N

Are you legally authorized to work in the United States? Y N

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa Status)? Y N

Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

Have you ever been a defendant in a civil action for an international tort (intentional commission of a wrongful act)? Y N

Note: Answering yes does not automatically exclude you from further consideration for the position.

If yes, describe the nature of the intentional tort and the disposition of the action below:

How did you learn of our Company? _____

If referral based, who were you referred by? _____

Have you ever applied or worked here before? Y N If yes, provide dates: _____

II. RESIDENCES: (Part 391.21 (b)(3)) (Please provide your addresses of residences for the past seven years beginning with the most recent address.)

Street Address (1)	City	State	Zip Code	From	To
Street Address (2)	City	State	Zip Code	From	To
Street Address (3)	City	State	Zip Code	From	To
Street Address (4)	City	State	Zip Code	From	To
Street Address (5)	City	State	Zip Code	From	To

III. EDUCATION: Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for. (May or may not be considered depending on job applied for)

Name, City and State of Education Institution	Graduated?		If no Degree, Credits Earned	Type of Degree Received or Expected	Major	Minor	Overall GPA
	Yes	No					
High School							
College or University							
Technical/ GED							
Licenses/ Certifications/ Other							

IV. DRIVING RECORD: Answer only if driving is a requirement of the job for which you are applying.

Do you have a valid drivers license? Y N State: _____ License No.: _____

Have you had any tickets? Y N If yes, please explain below:

Has your license ever been suspended or revoked? Y N If yes, please explain below:



V. EMPLOYMENT HISTORY: Please complete for all full-time or part-time employment beginning with most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis.

Company Name (1)	Telephone Number	Employed - From	To
Address		Rate of Pay - Start	Last
May we contact? Y N			
Name of Supervisor			
State job titles and attach resume if available: _____			
Reason for leaving? _____			

Company Name (2)	Telephone Number	Employed - From	To
Address		Rate of Pay - Start	Last
May we contact? Y N			
Name of Supervisor			
State job titles and attach resume if available: _____			
Reason for leaving? _____			

Company Name (3)	Telephone Number	Employed - From	To
Address		Rate of Pay - Start	Last
May we contact? Y N			
Name of Supervisor			
State job titles and attach resume if available: _____			
Reason for leaving? _____			

Company Name (4)	Telephone Number	Employed - From	To
Address		Rate of Pay - Start	Last
May we contact? Y N			
Name of Supervisor			
State job titles and attach resume if available: _____			
Reason for leaving? _____			

Company Name (5)	Telephone Number	Employed - From	To
Address		Rate of Pay - Start	Last
May we contact? Y N			
Name of Supervisor			
State job titles and attach resume if available: _____			
Reason for leaving? _____			

VI. REFERENCES: Please list at least three persons not related to you who know your qualifications.

Name	Address	Phone	Relationship

Please explain any gaps in your employment history:

Have you ever been discharged or forced to resign? Y N If yes, please explain below:

Did you receive any disciplinary actions in the last 12 months of active employment? Y N

If yes, please explain: _____

Were you given a performance evaluation within the last 12 months of active employment? Y N

If yes, what was your score, and the range used? _____

Have you signed any non-compete or non-solicit agreement with any other employer that might restrict you from working for this company? Y N If yes, please explain below:

Note: You may be required to furnish a copy of the agreement.

VII. MILITARY SERVICE: Complete only if you served in the military.

Branch of Service

Number of Years / Months of Service

Rank at Discharge

Date of Discharge

Reason for Leaving

Describe below any military skills, training or experience you believe are relevant to the job applied for (or attach your resume):

VIII. CRIMINAL RECORD INFORMATION: You must answer all four questions below.

1. Have you been convicted of a felony in the last seven years? Y N If yes, date of conviction: _____
 2. Have you been convicted in the last seven years of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime? Y N
 3. Have you been convicted of or completed a period of incarceration in the past five years for any misdemeanor? Y N If the answer to the above question is “yes”, please state whether you were convicted more than five years ago for any offense? Y N
 4. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s) including penalty(ies) imposed, listing the nature of your offense(s), and your rehabilitation since the conviction(s).
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IX. ANY OTHER INFORMATION: Please provide any other information that you think would be relevant and/or useful to your application.

X. APPLICANT'S ACKNOWLEDGMENT

I hereby certify that I have read and fully understand this application. Prior to signing below, I had the opportunity to ask the Company about this application and to clarify any questions I might have had concerning this application form.

I hereby certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice.

I consent to and authorize the Company to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I understand that the Company may require additional Information from me and others regarding a driving position with the Company and I agree to provide that information.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER(S) WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER(S) POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER(S). I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE HUMAN RESOURCE MANAGER OR AN OFFICER OF WORKOVER SOLUTIONS INC.

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the Company at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

Hereby I certify that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature: _____ Date: _____