



Employment Application Form

ALL NEW EMPLOYEES WILL BE TESTED FOR ILLEGAL DRUGS

Date of Application:

Name

Last

First

Middle

Present address

Number

Street

City

State

Zip

Date of Birth

Social Security Number

Telephone

Alternate Phone:

Days available to work

Position applied for:

Mon

Tues

Wed

Thur

Fri

Sat

Hourly Salary desired:

Sun

Employment desired

FULL-TIME

PART-TIME

FULL- OR PART-TIME

When are you available to begin work?

Wage desired:

School attended:

High School ?
Did you graduate ?
Yes No

College / University
Did you graduate?
Yes No

Business / Trade School
Did you graduate?
Yes No

Other (specify):

HAVE YOU EVER BEEN CONVICTED OF A CRIME?

No

Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Do you have a valid Driver's License?

Yes

No

What is your means of transportation to work?

Driver's license number

State of issue

Passenger

Commercial (CDL) Class

Expiration date

Have you had any accidents during the past three years?

Yes

No

How many?

Have you had any moving violations during the past three years?

Yes

No

How Many?

Describe general work experience:

Describe any tools and equipment you are familiar with:

Are you currently a Reservist? Yes No If yes, what Branch

What frequency will you be engaged with the Reserves?

Work Experience

Please list your work experience for the **past Five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer	Name of last supervisor	Employment dates	Pay or salary
Address			
City, State, Zip Code		From	Start
Phone number		To	Final
Your last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

In exchange for the consideration of my job application by **Compressor Services**, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other **Compressor Services** practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of **Compressor Services** or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the owner of the Compressor Services. Both the undersigned and **Compressor Services** may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the **Compressor Services** may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the **Compressor Services** permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the **Compressor Services** from any liability as a result of such contract.

I also understand that (1) **Compressor Services** has a drug and alcohol policy that provides for pre-employment testing as well as random and /or periodic testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that maintaining a valid driver's license is a requirement for maintaining employment. Failure of which, will result in immediate termination from **Compressor Services**. I further understand that my employment with the **Compressor Services** shall be probationary for a period of One Hundred and Eighty (180) days, and further, that at any time during the probationary period or thereafter, my employment relation with the **Compressor Services** is terminable at will for any reason by either party.

Signature of applicant _____ Date: _____

Compressor Services is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, citizenship, age or disability. We assure you that your opportunity for employment with **Compressor Services** depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.