

TIGER FIELD SERVICES

APPLICATION OF EMPLOYMENT

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Note: Please type or print your answers. If you print, please do so in blue or black ink and write neatly. An illegible application may preclude you from consideration.

POSITION APPLYING FOR: _____

PERSONAL INFORMATION

First Name _____ Middle Initial _____ Last Name _____

Current Address:

Street and Apt. # _____ City _____ State _____ Zip Code _____

Permanent Address (if different from above):

Street and Apt. # _____ City _____ State _____ Zip Code _____

Telephone: _____ E-mail: _____

Social Security #: _____ - _____ - _____ Driver's License #: _____ State: _____

I am an U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis:

Yes **No**

If applicable, please list your visa type, visa # and expiration:

Have you ever been convicted of a crime in the past seven years (you are not obligated to disclose sealed or expunged criminal records)? **Yes** **No**

If you answered yes, please explain:

Have you ever served in the U.S. Military? **Yes** **No**

If yes, please provide the following information:

Branch of Service: _____ Rank at time of separation: _____

I served from _____ to _____.

EMPLOYMENT HISTORY:

Present or Most Recent Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ May we contact? Yes No
Name Title

Reasons for Leaving: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ May we contact? Yes No
Name Title

Reasons for Leaving: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ May we contact? Yes No
Name Title

Reasons for Leaving: _____

EDUCATION

High School

Name and Address

Did you graduate? Yes No **Attended from** _____ **to** _____.

If you did not graduate, did you receive your GED? Yes No

Special honors or awards: _____

Technical or Vocational School

Name and Address

Did you graduate? Yes No **Attended from** _____ **to** _____.

Degree or Certification: _____ **Specialty:** _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes No **Attended from** _____ **to** _____.

Degree: _____ **Major:** _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes No **Attended from** _____ **to** _____.

Degree: _____ **Major:** _____

Special honors or awards: _____

EMPLOYEE'S EMERGENCY INFORMATION:

Medical Information

Primary Physician: _____ Phone Number: _____

Allergies: _____

Medicines Being Used Now: _____

Emergency Contact: _____ Phone Number: _____

Contact Relationship: _____

Other Information In Case of an Emergency: _____

POSITION INFORMATION:

Position Specifications

Position Applying For: _____

How did you hear about this job? _____

What hours are you willing to work? _____

Would you be able to work weekends? **Yes** **No**

Are you willing to travel for the job? **Yes** **No**

When would you be able to start? _____

Desired salary: _____ per _____

Skills

Please describe any skills you have in the following areas:

Computer:

Languages Spoken (other than English):

Other:

I hereby certify that my answers and assertions set forth in this application are true and complete to the best of my knowledge. If I am employed, I understand that any false statements on this application shall be considered sufficient cause for my dismissal. I hereby authorize this company to investigate any aspect of my prior educational and employment history.

Furthermore I understand that if I am hired, employment with this company is "at will," which means that either the company or I can terminate my employment for any reason not prohibited by state or federal law.

Signature: _____ **Date** _____