

# Edris Oil Service Inc / Shane Water Transport

## EMPLOYMENT / JOB APPLICATION

### PERSONAL INFORMATION

FULL NAME: \_\_\_\_\_ DATE: \_\_\_\_\_  
First Middle Last

ADDRESS: \_\_\_\_\_  
Street Address Apt/Suite  
City State Zip Code

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

SOCIAL SECURITY NUMBER (SSN): \_\_\_\_ - \_\_\_\_ - \_\_\_\_

DATE AVAILABLE: \_\_\_\_\_ DESIRED PAY: \$ \_\_\_\_\_ ☐ HOUR ☐ SALARY

POSITION APPLIED FOR: \_\_\_\_\_

EMPLOYMENT DESIRED: ☐ FULL-TIME ☐ PART-TIME ☐ SEASONAL

### PREVIOUS EMPLOYMENT

EMPLOYER 1: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City State Zip Code  
STARTING PAY: \$ \_\_\_\_\_ ☐ HOUR ☐ SALARY ENDING PAY: \$ \_\_\_\_\_ ☐ HOUR ☐ SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

EMPLOYER 2: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

City State Zip Code  
STARTING PAY: \$ \_\_\_\_\_ ☐ HOUR ☐ SALARY ENDING PAY: \$ \_\_\_\_\_ ☐ HOUR ☐ SALARY

JOB TITLE: \_\_\_\_\_ RESPONSIBILITIES: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

### REFERENCES

(PROFESSIONAL ONLY)

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

FULL NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

COMPANY: \_\_\_\_\_ TITLE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

### EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S?

☐ YES ☐ NO\*

HAVE YOU EVER WORKED FOR THIS EMPLOYER?

☐ YES\* ☐ NO

\*IF YES, WRITE THE START AND END DATES: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

☐ YES\* ☐ NO

\*IF YES, PLEASE EXPLAIN: \_\_\_\_\_

### EDUCATION

HIGH SCHOOL: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

GRADUATE? ☐ YES ☐ NO DIPLOMA: \_\_\_\_\_

COLLEGE: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

GRADUATE? ☐ YES ☐ NO DEGREE: \_\_\_\_\_

OTHER: \_\_\_\_\_ CITY / STATE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

DEGREE/CERTIFICATION: \_\_\_\_\_

### MILITARY SERVICE

ARE YOU A VETERAN?

☐ YES ☐ NO

BRANCH: \_\_\_\_\_ RANK AT DISCHARGE: \_\_\_\_\_

FROM: \_\_\_\_\_ TO: \_\_\_\_\_

TYPE OF DISCHARGE: \_\_\_\_\_

IF NOT HONORABLE, PLEASE EXPLAIN: \_\_\_\_\_

### BACKGROUND CHECK CONSENT

IF ASKED, ARE YOU WILLING TO CONSENT TO A BACKGROUND CHECK? ☐ YES ☐ NO

### DISCLAIMER

Applicant understands that this is an Equal Opportunity Employer and committed to excellence through diversity. In order to ensure this application is acceptable, please print or type with the application being fully completed in order for it to be considered.

Please complete each section EVEN IF you decide to attach a resume.

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

PRINT NAME \_\_\_\_\_