



APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER

ALL APPLICANTS MAY BE SUBJECT TO PRE-EMPLOYMENT DRUG TESTING.

PERSONAL INFORMATION

Date: _____

Name (Last Name First)		Social Security No.	
Present Address	City	State	Zip Code
Previous Address	City	State	Zip Code
Phone No.	Referred By		

EMPLOYMENT DESIRED

Position	Date you can start	Salary Desired
Are you employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you below the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, can you furnish a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No

EMPLOYMENT HISTORY (INCLUDING MILITARY SERVICE)

List your last four employers, assignments or volunteer activities, starting with the most recent, including military experience.

Employer	Telephone ()	Dates Employed From	To	Summarize the nature of the work performed and job responsibilities
Address		Hourly Rate/Salary Starting		
Job Title		\$	Per	
Immediate Supervisor and Title		Hourly Rate/Salary Ending		
Reason For Leaving		\$	Per	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
Employer	Telephone ()	Dates Employed From	To	Summarize the nature of the work performed and job responsibilities
Address		Hourly Rate/Salary Starting		
Job Title		\$	Per	
Immediate Supervisor and Title		Hourly Rate/Salary Ending		
Reason For Leaving		\$	Per	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	
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Job Title		\$	Per	
Immediate Supervisor and Title		Hourly Rate/Salary Ending		
Reason For Leaving		\$	Per	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		\$	Per	

EMPLOYMENT HISTORY (continued)

Please explain any gaps in employment:

EDUCATION AND TRAINING

Name and Location of School	Years Attended	Did You Graduate	Subjects Studied
High School			
College			
Trade, Business or Correspondence School			

GENERAL

Subjects of special study, research work, special training, skills or any hobbies, clubs or professional groups to which you belong that have a direct bearing on the position for which you are applying.

REFERENCES

Give below the names of three persons not related to you, whom you have known for at least one year.

Name	Address	Occupation & Company	Telephone Number

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative. Unless so authorized in writing, any employment relationship with Century Drill & Tool Corp. is at will, which means Century may discharge me at any time with or without cause, and with or without notice."

Date: _____ Signature: _____

Interviewed By: _____ Date: _____

----- DO NOT WRITE BELOW THIS LINE -----

REMARKS
