



EMPLOYMENT APPLICATION

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Shreveport, La 71107
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NOTE: PLEASE COMPLETE ALL SECTIONS OF THIS FORM.

Application Date: _____

PERSONAL DATA

FULL NAME _____
LAST FIRST MIDDLE

PRESENT ADDRESS _____
NUMBER & STREET CITY STATE ZIP

HOME PHONE () _____ CELL PHONE () _____

EMAIL ADDRESS: _____

EMERGENCY CONTACT: Name: _____ Relationship: _____

Number (s): () - () -

Do you have a valid Driver's License? Yes No CDL? Yes No Type/Number: _____

Date Available for Employment: _____

List any relatives or friends working for this organization: _____

Have you been convicted of any crime, other than traffic violations but including DUI, in the last 5 years? Yes No

If yes, please explain: _____

CONVICTION FOR AN OFFENSE WILL NOT NECESSARILY DISQUALIFY YOU FROM CONSIDERATION.

EDUCATION

| Name & Location of School | Number of Years Completed | Did you Graduate? | Major/Degree |
|---------------------------------|---------------------------|-------------------|--------------|
| High School | | | |
| Univ./College | | | |
| Univ./College | | | |
| Military, Business Trade, Other | | | |

EMPLOYMENT HISTORY

Your present or most recent employer:

| | | |
|----------------------------------|--|---------------------|
| Starting Salary \$ _____ | Address: _____ | City & State: _____ |
| from Mo./Yr. _____ Mo./Yr. _____ | Supervisor: _____ | Phone No: _____ |
| to Mo./Yr. _____ Mo./Yr. _____ | Title of position held and duties performed: _____ | |
| Ending Salary \$ _____ | | |

What were your reasons for leaving?

Name of previous employer:

| | | |
|----------------------------------|--|---------------------|
| Starting Salary \$ _____ | Address: _____ | City & State: _____ |
| from Mo./Yr. _____ Mo./Yr. _____ | Supervisor: _____ | Phone No: _____ |
| to Mo./Yr. _____ Mo./Yr. _____ | Title of position held and duties performed: _____ | |
| Ending Salary \$ _____ | | |

What were your reasons for leaving?

List any other jobs not covered above.

| Name of Company | Position | Employment Dates | Ending Dates | Reasons for Leaving |
|-----------------|----------|------------------|--------------|---------------------|
| | | | | |
| | | | | |

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

(1) _____

(2) _____

(3) _____

PLEASE READ THE FOLLOWING STATEMENTS BEFORE SIGNING BELOW

The facts set forth in this application for employment are true and complete. I understand that if employed, false statements, omissions or misleading statements on this application shall be considered sufficient cause for dismissal and I agree that my prospective employer shall not be held liable in any respect if my employment is terminated because of such omissions or false or misleading statements. My prospective employer is hereby authorized to investigate my employment history, including the contacting of the employers listed on the previous page. I hereby release my former employers from all liability on account of furnishing information regarding my work record to my respective employer. (If there is a particular employer you do not wish us to contact, please indicate which one and why.) I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time without any prior notice. I further understand and agree to abide by all company procedures and safety rules, including submitting to substance abuse testing, if requested, as a condition of continued employment.

Signature _____ Date _____