



# Application for Employment

(ONLY ORIGINAL APPLICATION FORMS ACCEPTED)

Name (Last, First, Middle)	Social Security #	Date
Address (Street No. or RFD Box No.)		Home Telephone No.
City	State	Zip Code
		Business, Message or Cell No.

### PERSONAL DATA

Are You 18 Years of Age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have You Ever Been Convicted of a Felony? <input type="checkbox"/> Yes <input type="checkbox"/> No    Specify:	Do you have a Valid Drivers License: <input type="checkbox"/> Yes <input type="checkbox"/> No
<small>(NOTE: Existence of conviction record is not a bar to employment)</small>	

### CAREER INTERESTS

For What Type of Work Are You Applying?    Be Specific as To Title of Job	When Can You Start Work?
Have You Ever Been Employed By Western Energy Company? <input type="checkbox"/> Yes <input type="checkbox"/> No      When      Where?      Last Position?      Immediate Supervisor?	

### EDUCATION AND TRAINING

Type Of School	Name And Location Of School	Major	Degrees	Circle Last Year Completed
High School			Graduated? Yes    No GED	9 10 11 12
College		Major	Degree	1 2 3 4
College			Degree	1 2 3 4
Graduate School			Degree	1 2 3 4
Trade or Business School			Degree	1 2 3 4
Special, Technical, Correspondence			Degree	Number of Study Hours or Credits
Indicate Other Relevant Training or Experience:				

## WORK HISTORY

***This portion of the application must be completed even if a resume is submitted.  
List the Last Four Positions You Have Held Beginning With Your Most Recent or Present Job***

1. Employer's Name	Position	Date Hired	Date Left	Starting Rate
Address and Phone Number		Name of Supervisor		Ending Rate
Duties and Responsibilities			Why Did You Leave?	
2. Employer's Name	Position	Date Hired	Date Left	Starting Rate
Address and Phone Number		Name of Supervisor		Ending Rate
Duties and Responsibilities			Why Did You Leave?	
3. Employer's Name	Position	Date Hired	Date Left	Starting Rate
Address and Phone Number		Name of Supervisor		Ending Rate
Duties and Responsibilities			Why Did You Leave?	
4. Employer's Name	Position	Date Hired	Date Left	Starting Rate
Address and Phone Number		Name of Supervisor		Ending Rate
Duties and Responsibilities			Why Did You Leave?	

## PERSONAL REFERENCES

LIST THREE, KNOWN FOR AT LEAST THREE YEARS, Other than relatives or former employers listed above

Name and Occupation	Home Address	Phone

## PROBATIONARY PERIOD

I, \_\_\_\_\_ hereby acknowledge that should I be selected for employment by Western Energy Company, as a result of this application, I will be employed as a probationary employee for a period of ninety (90) days, during which time continued employment is at the absolute discretion of the Company. Temporary and summer employees are considered probationary during the entire time they are employed by the Company.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

## PLEASE READ AND SIGN YOUR NAME

This company is an EQUAL OPPORTUNITY EMPLOYER and considers all applicants for employment without regard to race, color, sex, religion, national origin, age, or the presence of non-job related disabilities.

If I am employed by Western Energy Company, I will comply with all rules and regulations set forth by the Company. I understand that a physical examination by a doctor selected by the Company will be required for DOT positions and may be required for Non-DOT positions, to which I hereby assent. I understand that I must successfully pass a drug screening examination which is required for all Western Energy Company positions, to which I hereby assent.

I certify that all answers to questions in this application are true and complete to the best of my knowledge. I understand that any false statements on this application or omission of fact on either this application or during the pre-employment process may result in my application being rejected, or, if I am hired, in my employment being terminated.

I hereby acknowledge that I have read and understand the above statements. I hereby authorize Western Energy Company, either on its own or by and through an agent, to thoroughly investigate my references, work record, education and other matters related to my suitability for employment, such as criminal convictions, and, further, authorize my present employer or any former employer or any other party, including any Government or law enforcement agency and the references I have listed, to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release from all liability or responsibility, all persons, companies, or corporations responding to such inquires.

I acknowledge this application is to be considered only for this particular opening and will become inactive when this position is filled.

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

# APPLICANT AFFIRMATIVE ACTION INFORMATION



It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to race, color, religion, national origin, sex, age, veteran status or disability. As an affirmative action employer under E.O. 11246 we invite all applicants to identify themselves as indicated below.

**COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.**

Applicant Name \_\_\_\_\_  
Last First M.I.

FEMALE  MALE

Please identify to the following, by marking one (or more) applicable race or ethnic category(s)

- WHITE** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa
- AMERICAN INDIAN OR ALASKA NATIVE** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- BLACK OR AFRICAN AMERICAN** – A person having origins in any of the black racial groups of Africa.
- ASIAN** – a PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF THE Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- HISPANIC OR LATINO** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- I ELECT NOT TO IDENTIFY**

PLEASE CHECK THE BOX WHICH BEST DESCRIBES HOW YOU WERE REFERRED FOR EMPLOYMENT:

1. Job Service  2. Self  3. Classified Advertisement  
 4. Employee Referral  5. Employment Agency  6. Other \_\_\_\_\_

Position Applied For: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date