LATSHAW DRILLING COMPANY

	F				For SUPERVISOR Use Only: (Fill out once employed)			
								_ Temporary?
								Transfer:
				1st Day V	Vorked	1:	Date of	Birth:
APPLICATION FOR DOMESTIC EMPLOYMENT				Position:				
AN EQUAL OPPORTUNITY EMPLOYER								
IMPORTANT: Read the application special attention given to qu	estion regarding refe	rences and work rec	ord. All inform		plication	will be treated confide		
PERSONAL INFOR	MATION	DATE:	/	/	Sc	ocial Security #	-	-
(PRINT ABOVE)	LAST NAME			FIRST NAME	:		MID	DLE NAME
MAILING ADDRESS:	STREET & NUM	IBER or P.O. BOX		CITY		STAT	E ZIP	CODE
PERMANENT ADDRESS:	STREET & NUN	IBER or P.O. BOX		CITY		STAT	E ZIP	CODE
()	-		()	-			
HOME PHONE NUMBER			CELL PHO	ONE NUMBER		EMAI	L	
EMERGENCY CONTACT:								
NAME:				PHC	DNE: ()	-	
ADDRESS:								
CITY:		STATE	:	ZIP CC	DE:	RELA	TIONSHIP:	
HAVE YOU EVER BEEN CONVICTED OF A FELONY?				YES		NO		
IF YES, EXPLAIN:								

Disclosure of a criminal record does not automatically disqualify you from employment consideration. Your case will be judged upon its own merits.

NAME ANY RELATIVES ALREADY EMPLOYED BY THIS COMPANY:

EDUCATION	Name & Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied & Degree(s) Received
High School		1234	Yes No	
College		1234	Yes No	
Trade, Business, or Correspondence School		1234	Yes No	

REFERENCES

DO NOT LIST RELATIVES. Include in your references rig superintendents, toolpushers, drillers, etc. that you have worked for or with. Be sure to give current phone numbers and addresses as this expedites the handling of your application. (Minimum of 5 references)

NAME	ADDRESS	OCCUPATION	TELEPHONE #
1			
2			
3			
4			
5			

EMPLOYM							
		-	ary service record and periods of under the month where you were self-emp	ployed or unempl	oyed, list name a		
FROM	то	<u> </u>	period(s). Attach		-	& DESCRIPTION OF WORK	
MO/YR	M0/YR	EMPLOYER, ADD	RESS, & TELEPHONE NUMBER	SALARY	500 11122	PERFORMED	SPECIFIC REASON FOR LEAVING
TYPE OF EXP	ERIENCE		HOW MANY MONTH	S AND/OR Y	EARS?	TYPE OF R	IG/EQUIPMENT
RIG SUPERINTEN	IDENT						
TOOLPUSHER							
DRILLER							
DERRICKMAN							
MOTORMAN							
FLOORMAN							
RIG MECHANIC							
RIG ELECTRICIAN	N						
ROUSTABOUT							
WELDER OTHER							
UTHER							
LIST ALL LOC	ATIONS WH	ere you have	LIVED IN THE LAST 7 YEA	RS (attach a	dditional she	eets if necessary):	
FROM DATE:		TO DATE:	Cľ	TY/COUNTY/STA	TE:		
FROM DATE:		TO DATE: CITY/COUN			TE:		
FROM DATE:		TO DATE:	Cľ	TY/COUNTY/STA	TE:		
FROM DATE:		TO DATE:	Ci	TY/COUNTY/STA	TE:		
WORK IN	TEREST						
POSITION APPLIE	D FOR:						
LOCATION PREFE							
EARLIEST DATE	AVAILABLE:						
					ME0	NO	
HAVE YOU EVER	FILED AN APPL	ICATION WITH THIS	S COMPANY BEFORE?		YES WHEN?	NO	WHERE?
HAVE YOU EVER BEEN EMPLOYED BY THIS COMPANY BEFORE?				YES	NO		
				WHEN?		WHERE?	
REFERRAI	1						
REFERRAL	<i>م</i> ا						
WERE YOU REFE	RRED TO THIS	COMPANY BY AN E	MPLOYEE OF THIS COMPANY?			YES	NO
IF YES, WHAT WA	AS THE EMPLOY	EE'S FULL NAME?					

I hereby certify my answers to the questions and statements in this application are true and complete and that I have not misrepresented myself in any of the information. If employment is obtained under this application, I will comply with all orders, rules, and regulations of Latshaw Drilling Company. I authorize the Company to verify any and all of the information listed in this application, including but not limited to my references, work history, eligibility for employment in the United States, social security number, educational history, criminal background, worker's compensation background, and motor vehicle record. I authorize tmy former employers, educational institutions, and references to give any information they may have regarding me. I hereby release them and their organizations from all liability for any damage for issuing same. If upon investigation anything contained in this application is found to be untrue, I understand that this will constitute a release to the employer for any liability that he may encounter by having acted on such facts and that I will be subject to dismissal. I understand that employment with the Company is at-will and that employment may be terminated by the Company or myself for any reason or no reason and at any time.