

Quality Energy Services, Inc

Quality Energy Services, Inc Is An Equal Opportunity Employer

Application for Employment

Please complete this form and sign. We prefer you also attach your resume, if available.

Position You Are Applying For: _____

Desired Salary (Be Specific): _____

How Did You Hear About This Position? Please write in specific details.

<input type="checkbox"/> Newspaper:	<input type="checkbox"/> QES Employee:
<input type="checkbox"/> Internet Job Board:	<input type="checkbox"/> Other:

PERSONAL INFORMATION:

Last Name, First Name, Middle Initial		Preferred First Name	
Street Address		City, State, Zip	
Daytime Phone Number		Type of Number: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Other	
Evening/Other Phone Number		Type of Number: <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/> Cell <input type="checkbox"/> Other	
Email Address			
Driver's License Number:		Expiration Date:	State of Issuance:
Have you had any accidents in the last 3 years?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, describe:			
Have you been cited for any moving violations in the last 3 years?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, describe:			
Have you ever been convicted of a crime?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please list the date of conviction(s), nature of offense(s) leading to conviction(s), sentence(s) imposed, and type(s) of rehabilitation:			
Have you ever pled guilty to a crime?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please list the date of conviction(s), nature of offense(s) leading to conviction(s), sentence(s) imposed, and type(s) of rehabilitation:			
Are any criminal charges against you pending?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, please describe 1.) the nature of the alleged crime, 2.) date of issue, and 3.) county/parish and state of issue:			

Please Print All Information

Military

Have you ever been in the military? Yes No

Are you presently on active duty or a member of the National Guard? Yes No

Date Entered: _____ Date Discharged: _____

Type of Discharge: _____ Specialty: _____

Education

Type/Name of School	City/State	Degree?	Yr. of Graduation or Yrs. Attended	Major and Degree
High School Name:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
College/University Name:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Higher Education Name:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Business/Trade School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Professional School:		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Languages Spoken:				

References

Please list two people (who are neither relatives nor former employers) who can attest to your character.

Name:	
Relationship:	
Years known:	
Telephone:	

Name:	
Relationship:	
Years known:	
Telephone:	

Which of the character traits listed below will he or she confirm that you possess?
(Circle all that apply)

Trustworthy Responsible Dependable Loyal Leader Faithful

Which of the character traits listed below will he or she confirm that you possess?
(Circle all that apply)

Trustworthy Responsible Dependable Loyal Leader Faithful

Employment History

Please list your work experience for the **past five years**, beginning with your most recent job.
If you were self-employed, list the name of your firm.

Company:	Address:	Phone:	Supervisor Name:
		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Employed:	Your Title:	Ending Salary:	Reason For Leaving:
From: _____ To: _____			

List the duties you performed, skills you used or learned, positions you held and promotions you received.

Company:	Address:	Phone:	Supervisor Name:
		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Employed:	Your Title:	Ending Salary:	Reason For Leaving:
From: _____ To: _____			

List the duties you performed, skills you used or learned, positions you held and promotions you received.

Company:	Address:	Phone:	Supervisor Name:
		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates Employed:	Your Title:	Ending Salary:	Reason For Leaving:
From: _____ To: _____			

List the duties you performed, skills you used or learned, positions you held and promotions you received.

Use the space below to summarize additional information describing your experience or other facts that highlight your qualification for the position for which you are applying. You may also include any explanations you feel would clarify other issues addressed in your application.

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

Please initial in the indicated areas to indicate you have read the statements referenced herein.

In exchange for the consideration of my job application by Quality Energy Services, LLC. (hereinafter called "the Company"), I agree that:

1. Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company, or otherwise to change in any respect the "employment-at-will" relationship between the Company and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies, and procedures, and such changes may include reduction in staff and/or benefits.

My initials indicate I have read Section 1 above: _____

2. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts required is cause for dismissal at any time without any prior notice. I hereby give the Company permission to contact **schools, prior employers (unless otherwise indicated), references, and others. The Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, in compliance with the Fair Credit Reporting Act.** I further authorize the Company to complete a **criminal background check and obtain a copy of my driving record.** I hereby release the Company from any liability as a result of such contacts, inquiries, or records in order to ascertain my qualifications and fitness for employment.

My initials indicate I have read Section 2 above: _____

3. I also understand that (1) the Company has a **drug and alcohol policy that provides for pre-employment testing as well as a random testing program after employment;** (2) my consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on my successful passing of testing mandated by such policy. I further understand that my continued employment may be based on the successful passing of job-related physical examinations.

My initials indicate I have read the above: _____

I have also signed the following attached forms, thereby giving the authorization required to process my application: 1) Driver Information Release 2) Drug Testing Consent Form

My initials indicate I have read the above: _____

I further understand that my employment with the Company shall be considered probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable "at will" for any reason by either party.

My initials indicate I have read Section 3 above: _____

The Company is an equal employment opportunity employer. It is our policy to make employment decisions without regard to race, color, religion, sex, national origin, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications. This application will be considered active for a period of 90 days from the date of the applicant's signature below.

Thank you for completing this application form and for your interest in Quality Energy Services, LLC.

Signature of Applicant: _____ Date: _____

Printed Name of Applicant: _____ Phone: _____