

Employment Application

Date of Application:	Position applying for:								
PERSONAL INFORMATION									
Name (last, first, middle	2)								
Street Address and/or N	City	City			State	Zip			
Cell Phone Number		Alternate Phone	Number	Email Address			S		
Date you can start work	(Do you have a H Yes	-	I Diploma or GED?					
POSITION INFORMATION Check all that you are willing to work									
Full-Time	Hours.	Days 🗖 Evenings 🗖	Swing Grave	Swing Graveyard Status: Regular Contract					
Are you authorized to work in the U.S. on an unrestricted basis? Yes No									
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes No									
Can you perform these essential functions of the job with or without reasonable accommodation? Yes 🗆 No 🗌								No 🗖	
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.									
	Schoo	l Name	Degree	Address					
School									
School									

Pima Oilfield Services LLC is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status, or any other legally protected class in accordance with federal law. In addition, **Pima Oilfield Services LLC** complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. **Pima Oilfield Services LLC** also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

Other									
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you do not have three professional references, then list personal, unrelated references.									
Name				/City/State			Relation to You		
PREVIOUS EMPLOYMENT									
Position				Start Date			End Date		
Company Name	Company Name		Supervisor's Name			Phone Nur	Phone Number		
City			State			Zip	Zip		
Duties:									
Daaraa faalaa iyo									
Reason for Leaving									
Position		Start Date			End Date	End Date			
Company Name		Supervisor's Name			Phone Nur	Phone Number			
City		State			Zip	Zip			
Duties:									
Reason for Leaving									
Position		Start Date			End Date	End Date			
Company Name		Supervisor's Name			Phone Nur	Phone Number			
City		State			Zip	Zip			
Duties:									
Reason for Leaving									

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Do you have any gaps in your employment history? If yes, please explain:	Yes 🗖	No 🗖	
Have you ever been involuntarily terminated or asked If yes, please explain:	to resign from any	job? Yes 🗖	No 🗌

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employment.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and the Company can terminate my employment with or without cause and with or without notice at any time. I acknowledge that should I wish to terminate my employment, I am expected to provide at least 2 weeks written notice to my employer. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

Applicant Signature

Date

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