



Application for Employment

You will not be considered for employment if you fail to completely answer all the questions on this application.

Applicants must use their legal name that matches the acceptable documents used as evidence of identity for employment authorization.

Are you legally authorized to work in the United States? Yes No

Applicant Information

First Name			
Middle Name			
Last Name			
Street Address			
City		State & Zip Code	
Social Security #		Available Start Date	
Phone Number		Desired Salary	
Are you 18 years of age or older?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Do you have a valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
What position are you applying for?			

Disclaimer and Signature

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.

Applicant Signature

Date

Experience

Do you have prior oil and gas experience or related experience? Yes No

If yes, what kind of relevant experience do you have and how many months/years:

Roustabout/Labor Hand _____ Months _____ Years Pusher _____ Months _____ Years

Flowback _____ Months _____ Years

Mechanic:

Diesel _____ Months _____ Years Heavy Equipment _____ Months _____ Years

Automotive _____ Months _____ Years Other _____ Months _____ Years

Heavy Equipment Operator (type of equipment):

Excavator _____ Months _____ Years Roller _____ Months _____ Years

Dozer _____ Months _____ Years Blade _____ Months _____ Years

Skid-Steer _____ Months _____ Years Backhoe _____ Months _____ Years

Milling Machine _____ Months _____ Years Mulcher _____ Months _____ Years

Loader _____ Months _____ Years Scraper _____ Months _____ Years

Other _____ Months _____ Years

Truck Driver (CDL):

Hydrovac _____ Months _____ Years Belly Dump _____ Months _____ Years

Dump Truck _____ Months _____ Years Vacuum Truck _____ Months _____ Years

Heavy Haul _____ Months _____ Years Roll-off _____ Months _____ Years

Winch Truck _____ Months _____ Years

Other _____ Months
 _____ Years

Other Experience Not Specified Above:

Other _____ Months
 _____ Years

Other _____ Months
 _____ Years

Other _____ Months
 _____ Years

Prior Employment History				
Most Recent Employer				
Company Name			Phone #	
Address				
City			State & Zip	
Start Date		End Date		Position
Reason for Separation:				
Second Most Recent Employer				
Company Name			Phone #	
Address				
City			State & Zip	
Start Date		End Date		Position
Reason for Separation:				
Third Most Recent Employer				
Company Name			Phone #	
Address				
City			State & Zip	

Start Date		End Date		Position	
Reason for Separation:					

MVR RELEASE CONSENT FORM



I _____ consent to the release of my Motor Vehicle Records (MVR) to BDS Enterprises LLC in conjunction with my potential employment or as needed if employed with BDS Enterprises LLC. I understand the company will use these records to evaluate my suitability to fulfill driving duties that may be related to the position appointed to me. I also consent to the review, evaluation, and other use of any MVR I may have provided to the company and allow any information obtained to be shared with the proper personnel within BDS Enterprises LLC or for insurance purposes.

This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., "Federal Drivers Privacy Protection Act", and is intended to constitute "written consent" as required by this Act...

Signed (applicant):

Printed Name:

Date: _____

Driver's License Number: _____ State:

Last four of SSN: _____ Other:
