

For Office Personnel only:

Received by: \_

signature

Date Received:

# **EMPLOYMENT APPLICATION**

## PLEASE READ THIS APPLICATION THOROUGHLY AND COMPLETE IT HONESTLY. THIS EMPLOYER PERFORMS A DETAILED BACKGROUND INVESTIGATION ON ALL FINAL CANDIDATES.

**Important Notice:** Applicants should be extremely careful as they complete this application. This Company utilizes a sophisticated and detailed background and pre-employment investigation process. This process frequently discloses inaccurate, false, and/or incomplete or omitted information. Should this process determine any inaccurate or incomplete information, it will cause you to be either disqualified for employment with Paul Graham Drilling and Service Company as an applicant, or be grounds for termination if the inaccuracies are discovered subsequent to your employment. Accordingly, we strongly suggest that you NOT complete this application until you have the requisite time and accurate information to do so.

Paul Graham Drilling and Service Company is an equal opportunity employer and will not discriminate against any employee or applicant for employment in an unlawful manner. Employment is conditioned on the successful completion of the screening program. The information sought on this form is given voluntarily and may be used in filing reports required by state or federal governments.

PLEASE FILL OUT ALL THE SECTIONS BELOW:				
Applicant Name:				
List names you've used, including maiden names, nicknames, stage names, married names:				
Position Applied For:		Applica	tion Date:	
Address:				
City:		State:	Zip Code:	
Telephone Number:	Email Addr	ress:		
	please check all that app	plies:		
Type of Employment Desired:	Full-Time	Part-Time	Tempo	orary
How did you hear about us:   Advertisement Social Media  Social Media  Website  Walk in  Employment Agency  Relative/Friend  Other:   please fill & circle all that applies:				
Date you will be available to work	<b>K</b> :	Driver License #:		
Salary requirements:				
Are you able to meet the attendar	nce requirements?			Yes or No
Do you have any objection to working overtime if necessary?		. Yes or No		
Can you work evenings and weekends?		Yes or No		
Have you ever been previously er	nployed by Paul Graham Drill	ing and Service Co.	?	. Yes or No
If hired, can you show proof that you may legally work in the USA?		Yes or No		
If you are under 18, can you furnis	sh a work permit if it is require	ed?		Yes or No
May we contact your current emp	loyer?			Yes or No
Are you able to travel if required for	or your job duties?			Yes or No
2500 AIRPORT RD.	WWW.PAULGRAHAMDRILLIN	IG.COM P	HONE: (707)	
PO BOX 669	RIO VISTA, CA 94571		FAX: (707) 3	74-6821



### **EMERGENCY CONTACT**

NAME:	RELATIONSHIP:		
PHONE NUMBER:	HOME PHONE NUMBER:		
WORK PHONE NUMBER/EXT:	PREFFERED NUMBER:		
ADDRESS:	CITY:	STATE:	ZIP:
	ſ		
NAME:	RELATIONSHIP:		
PHONE NUMBER:	HOME PHONE NUMBER:		
WORK PHONE NUMBER/EXT:	PREFFERED NUMBER:		
ADDRESS:	CITY: STATE: ZIP:		

### **EMPLOYMENT HISTORY**

Please provide all employment information for the past seven years employment starting with the most recent. You may use another sheet if necessary.

EMPLOYER:	POSITION:	
ADDRESS:	IMMEDIATE SUPERVISO	R:
PHONE NUMBER	SUPERVISOR TITLE:	
DATES EMPLOYED: to _	OK TO CONTACT:	□ YES □ NO
JOB RESPONSIBILITY:	REASON FOR LEAVING:	
EMPLOYER:	POSITION:	
ADDRESS:	IMMEDIATE SUPERVISO	R:
PHONE NUMBER	SUPERVISOR TITLE:	
DATES EMPLOYED: to _	OK TO CONTACT:	□ YES □ NO
JOB RESPONSIBILITY:	REASON FOR LEAVING:	
2500 AIRPORT RD. WW	W.PAULGRAHAMDRILLING.COM	PHONE: (707) 374-5123
PO BOX 669	RIO VISTA, CA 94571	FAX: (707) 374-6821



EMPLOYER:	POSITION:	
ADDRESS:	IMMEDIATE SUPERVISOR:	
PHONE NUMBER	SUPERVISOR TITLE:	
DATES EMPLOYED: to	OK TO CONTACT: 🛛 YES 🗆 NO	
JOB RESPONSIBILITY:	REASON FOR LEAVING:	
OTHER SKILLS AND QUALIFICATIONS:		

Summarize any job-related training, skills, licenses, certifications, and/or other qualifications.

#### **EDUCATIONAL HISTORY**

List school name and location, number of years completed, course of study, and any degrees earned:

Type of School	Name and Location of School	Degree/Area of Study	# of yrs attended	Graduated (check one)
Highschool	Name:State:Zip:			□ YES □ NO
Undergraduate college	Name: City:State:Zip:			□ YES □ NO
Graduate Professor	Name:State:Zip:			□ YES □ NO
Other <i>(specify)</i>	Name:			□ YES □ NO

#### REFERENCES

List 3 people who can comment on your character and work habits, including telephone numbers, and years known (do not include relatives or employers):

NAME:		PHONE NUMBER:	
RELATIONSHIP:		YEARS KNOWN:	
2500 AIRPORT RD.		AMDRILLING.COM	PHONE: (707) 374-5123
PO BOX 669	RIO VISTA	x, CA 94571	FAX: (707) 374-6821



NAME:	PHONE NUMBER:	
RELATIONSHIP:	YEARS KNOWN:	
NAME:	PHONE NUMBER:	
RELATIONSHIP:	YEARS KNOWN:	
PLEASE COMMENT ON WHY WE SHOULD CONSIDER YOU FOR EMPLOYMENT:		

I hereby authorize the Paul Graham Drilling and Service Company to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the Paul Graham Drilling and Service Company and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I, or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that Paul Graham Drilling and Service Company does not discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

Are you able to perform the essential functions of the job for which you are applying, either			
with or without a reasonable accommodation?			
If no, please describe the function that you cannot perform:			

I also understand that I will be required to provide proof of a current clear DMV report if I am required to drive as a component of my job with Paul Graham Drilling and Service Company. I hereby authorize Paul Graham Drilling and Service Company to verify the validity of my driver's license at any time during my employment if I am required to drive in the course of my job with Paul Graham Drilling and Service Company.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

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# ARBITRATION

I agree that all claims by me arising during the application process, as well as during and following my employment with Paul Graham Drilling and Service Company including, but not limited to, unlawful discrimination and/or harassment, wrongful demotion, wrongful ermination, invasion of privacy, or defamation will be presented to a neutral arbitrator fo final and binding decision in accordance with the procedures adopted by Paul Graham Drilling and Service Company. Binding arbitration will be used as well in the event of a claim filed with either the Equal Employment Opportunity Commission or the California Department of Fair Housing and Employment once the agency has completed its determination.

I also agree that if any California Court with jurisdiction declares that any part of this arbitration agreement is illegal, invalid or unenforceable, such a declaration will not affect the legality, validity or enforceability of the remaining parts of the agreement and that illegal, invalid or unenforceable part will no longer be part of this agreement.

THIS AGREEMENT IS A WAIVER OF ALL RIGHTS TO CIVIL COURT ACTIONS FOR CLAIMS ARISING OUT OF THE APPLICATION PROCESS AS WELL AS EMPLOYMENT WITH PAUL GRAHAM DRILLING AND SERVICE COMPANY SHOULD IT BE OFFERED. ONLY THE ARBITRATOR, NOT A JUDGE OR JURY WILL DECIDE THE OUTCOME OF ANY CLAIM OR DISPUTE.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant Signature

Date

Please Note: Paul Graham Drilling and Service Company maintains applications on active file only for a 30 day period of time. If you wish to be considered after a 30 day period, please re-apply.