

Employment Application

Applicant Information

Full Name: _____ Date: _____

Last

First

M.I.

Address: _____

Street Address

Apartment/Unit #

City

State

ZIP Code

Phone: _____

Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Location Applied for: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Have you ever worked for this company? YES ☐ NO ☐ If yes, when? _____

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO
☐ ☐

Experience & Certification

Forklift Experience: ☐ Yes ☐ No If Yes, how many years? _____
Skidsteer Experience: ☐ Yes ☐ No If Yes, how many years? _____
Propane Bottle Fill Experience: ☐ Yes ☐ No If Yes, how many years? _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Horizon Resources is an equal opportunity employer.

I understand that the information on this application has been requested for the purpose of evaluating my qualifications for employment and that this document, or any item discussed regarding employment, does not constitute a contract or promise of employment. I affirm that the information provided in my application, resume, and interview is true and correct to the best of my knowledge. I authorize Horizon Resources to verify the information contained in my application and information I provide in the interview. I understand that misrepresentation or omission of information in connection with my application, resume, and/or interview may result in rejection of my application or dismissal whenever discovered.

I understand and agree that any offer of employment is contingent upon my satisfactory completion of Horizon Resources's pre-employment requirements which may include, but are not limited to: a health assessment, drug and alcohol testing, verification of current work authorization in the United States, background checks, work history and reference verification, and any other pre-employment requirements.

By signing below, I am affirming my understanding and acknowledgement of support in all items addressed in this document. I further understand that if I am hired by Horizon Resources, my employment will be "at will", which means that either Horizon Resources or I may terminate the employment relationship at any time for any reason. I further understand that, if hired, my at-will employment status may only be changed in a written contract signed by an officer of Horizon Resources (or designee) and that no representative of Horizon Resources has the authority to make any oral promise to me concerning my employment.

Signature: _____ Date: _____

EMPLOYER DISCLOSURE AND AUTHORIZATION FOR RELEASE OF INFORMATION

As part of our hiring background and investigation, and continuing employment practices, we may obtain employee driving history records. Under the provisions of the Drivers' Privacy Protection Act of 1994 (18 U.S.C. § 2721) before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation.

EMPLOYEE AUTHORIZATION AND RELEASE TO OBTAIN INFORMATION

Under the provisions of the said Drivers' Privacy and Protection Act and all applicable federal, state, and local laws, and as a condition of my employment with COMPANY. I hereby authorize and permit Employer and its successors throughout the course of my employment to obtain:

1. Records concerning any driving, criminal history, credit history, workers' compensation (post-offer only) and drug testing;
2. (For truck drivers only) In accordance with the Department of Transportation Motor Carrier Safety Regulations, Section 382.413, information concerning alcohol and controlled substances for the past 2 years;

I agree that a copy of this authorization has the same effect as an original.

I hereby release and hold harmless any person, firm, or entity that discloses matters in accordance with this authorization, as well as Employer from my liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information.

Driver's License Number: _____ State: _____

SS# _____ Date of Birth: _____

Applicant Name (printed): _____
FIRST MI LAST

Applicant Signature: _____

Location: _____