

APPLICATION FOR EMPLOYMENT

Top Drilling Corporation
HC 68, Box 14
Smithville, WV 26178

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Applicants may be tested for illegal drugs.

(Please Print Legibly)

Position(s) Applied For: _____	Date of Application: _____	
Name: _____		
Last	First	Middle
Address: _____		Zip _____
Number	Street	City
Telephone Number(s) _____		State _____
Social Security Number (Voluntary): _____		

Best time to contact you at home is: _____: _____ am / pm

If you are under 18 years of age, can you provide required proof of your eligibility to work? No Yes

Have you ever filed an application with us before? If Yes, Give date: ____/____/____ No Yes

Have you ever been employed with us before? If Yes, Give date: ____/____/____ No Yes

Are you currently employed? No Yes

May we contact your present employer? No Yes

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? No Yes
(Proof of citizenship or immigration status will be required upon employment)

Date available for work: ____/____/____ What is your desired salary/hourly range: \$ _____

Are you available to work: Full Time Part Time Temporary

How many hours can you work weekly? _____ Can you work nights? No Yes

Can you travel if job requires? No Yes

Have you ever been convicted of a crime? No Yes

If yes, explain number of convictions, nature of offense(s) leading to conviction(s), how recently committed, sentence imposed, and types of rehabilitation: _____

Have you ever been in the armed forces? If Yes, Dates of Services _____ No Yes

Branch of Service: _____, Duties: _____

Any Disability: No Yes

Are you now a member of the National Guard? No Yes

Do you have a Driver's License? No Yes

If Yes, (Please Choose) Operator Commercial (CDL) Chauffeur

--Education--

School	Name of School	Course of Study	No. Years Completed	Diploma / Degree
High School				
College				
Graduate / Professional				
Other (Specify)				

--Work Experience--

Please describe your past work history. Start with your present or most recent job.

Employer	Dates Employed		WORK PERFORMED
Address	<u>From</u>	<u>To</u>	
Telephone	Hourly Rate / Salary		
Job Title	<u>Starting</u>	<u>Final</u>	
Reason for Leaving		May We Contact: <input type="checkbox"/> No <input type="checkbox"/> Yes	

Employer	Dates Employed		WORK PERFORMED
Address	<u>From</u>	<u>To</u>	
Telephone	Hourly Rate / Salary		
Job Title	<u>Starting</u>	<u>Final</u>	
Reason for Leaving		May We Contact: <input type="checkbox"/> No <input type="checkbox"/> Yes	

Employer	Dates Employed		WORK PERFORMED
Address	<u>From</u>	<u>To</u>	
Telephone	Hourly Rate / Salary		
Job Title	<u>Starting</u>	<u>Final</u>	
Reason for Leaving		May We Contact: <input type="checkbox"/> No <input type="checkbox"/> Yes	

--Personal / Professional References--

Do not include family members or past supervisors.

<i>Name</i>	<i>Phone Number</i>	<i>Best Time to Call</i>	<i>Occupation</i>
1.			
2.			
3.			

--Applicant's Statement--

I certify that the answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary to be considered for employment

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Top Drilling Corporation is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date

Thank you for completing this application and for your interest in our business.