

# WSI CASED HOLE SPECIALIST

4668 FM 1607  
Snyder, Texas 79549  
(325) 573-3948

## APPLICATION FOR EMPLOYMENT

**WSI is an equal opportunity employer and does not discriminate against applicants or employees because of race, color, religion, national origin, sex, age, citizenship status, disability status of an otherwise qualified individual, membership or application for membership in a uniformed service, or any other characteristic protected by law. WSI maintains a drug-free workplace.**

### **Personal Information (please print in ink)**

Last Name	First Name	Middle Initial		
If your former employment, education, or military service may be under a name other than stated above, please indicate (Last, First, Initial):				
Present Address	Street	City/State	Zip	Phone
Permanent Address	Street	City/State	Zip	Phone
Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If no, proof of age will be required				
Have you ever worked here? Position?		<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, when?	In what department?
Supervisor? Reason for leaving:				
Do you have relatives working here? Relationship:		<input type="checkbox"/> Yes <input type="checkbox"/> No	If so, who? Department:	
Do you currently have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If so, please list issuing state and number: Having a valid driver's license and acceptable motor vehicle driving record are essential for virtually all jobs at WSI. <i>WSI generally will review motor vehicle driving records before deciding to interview an applicant.</i>				
Have you ever been convicted of a crime (excluding minor traffic violations)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, provide complete details, including the nature of the crime, the date and place of conviction, the date and place of incarceration, if any, and disposition, including any suspended sentence, fines, probation, deferred adjudication, or similar disposition. <i>Conviction of a crime is not an automatic bar to employment. All relevant circumstances, such as how long ago the conviction occurred and the crime involved, will be considered in relation to specific job requirements.</i>				

## WSI Cased Hole Specialist

Military Service?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Branch of service:	From:	To:
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				
<i>If offered a position with WSI, you will be required to provide documentation that proves your identity and employment eligibility.</i>				

### Employment Information

Position Desired: \_\_\_\_\_

Salary Expected:	Date available for work:
Are you applying for:	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer only
What shifts can you work:	<input type="checkbox"/> Any <input type="checkbox"/> Days <input type="checkbox"/> Evenings <input type="checkbox"/> Nights
Are you willing to work weekends or holidays?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you willing to travel for work assignments including overnight?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How often did you miss work last year?	
If you are applying for part-time or temporary work, please indicate the hours, days, and length of time you are available:	
Are you able to perform the functions of the job for which you are applying as described or demonstrated to you or as listed on the job description, if one has been provided to you, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
How did you hear about WSI?	
<input type="checkbox"/> Newspaper ad, which one: _____ <input type="checkbox"/> Placement firm: _____ <input type="checkbox"/> Previously employed at this facility: _____	<input type="checkbox"/> If employee referral, name of employee: _____ <input type="checkbox"/> Other, please specify: _____

### Educational History

Name of School	Location	Course of Study	# of Years Completed	Did you graduate?	Diploma or degree?
High School:					
Colleges:					
Graduate School:					
Business, Vocational, or Technical School					
Other, specify:					

## WSI Cased Hole Specialist

Clerical Skills, if applicable: <input type="checkbox"/> Typing _____ WPM <input type="checkbox"/> Shorthand _____ WPM <input type="checkbox"/> Dictaphone <input type="checkbox"/> Data entry <input type="checkbox"/> Other office skills:
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### Professional Licenses, Certifications, or Registrations

Type of License, Certification, or Registration	Issued by (state/organization)	Registration or Certification	Expiration Date

### Work History

Please fill out completely even if you have a resume. Start with your present or most recent job. Please include employment history of at least seven years. List self-employment, summer, and part-time jobs. If you need additional space, please use a separate sheet of paper.

Present or Most Recent Employer:		
Job Title:		
Complete street address:		
City	State/Zip	Phone
Supervisor's name:		Supervisor's title:
Starting date:		Ending date:
Starting salary:		Ending salary:
Reason for leaving:		
Brief description of job:		
Contact name:		Contact Phone Number:
Employer:		
Job Title:		
Complete street address:		
City	State/Zip	Phone
Supervisor's name:		Supervisor's title:

## WSI Cased Hole Specialist

Starting date:	Ending date:	
Starting Salary:	Ending Salary:	
Reason for leaving:		
Brief description of job:		
Contact name:	Contact Phone Number:	
Employer:		
Job Title:		
Complete street address:		
City	State/Zip	Phone
Supervisor's name:	Supervisor's title:	
Starting date:	Ending date:	
Starting salary:	Ending salary:	
Reason for leaving:		
Brief description of job:		
Contact name:	Contact Phone Number:	
Employer:		
Job Title:		
Complete street address:		
City	State/Zip	Phone
Supervisor's name:	Supervisor's title:	
Starting date:	Ending date:	
Starting Salary:	Ending Salary:	
Reason for leaving:		
Brief description of job:		

## WSI Cased Hole Specialist

Contact name:

Contact Phone Number:

### Please Read Carefully Before Signing

#### APPLICANT'S CERTIFICATION AND RELEASE STATEMENT

I hereby authorize Weaver Services, Inc. (WSI) to contact, obtain, and verify the accuracy of information contained in this application from all law enforcement agencies and any or all of my previous employers, references, and educational institutions, and otherwise to fully investigate my suitability for employment, character, general reputation, personal characteristics, mode of living, work habits, skills, or abilities. I understand that the results of any such investigation may be disclosed to WSI personnel involved in the employment decision, and I consent to the disclosure of any such information to WSI by those entities and individuals.

**In consideration of WSI's undertaking to review this application and to consider me for hire, I release and acquit WSI and its agents, employees, and affiliates from any liability whatsoever, INCLUDING LIABILITY RESULTING FROM NEGLIGENCE OR GROSS NEGLIGENCE, for any damage that I may suffer or sustain by reason of its acquisition or use of any such information.**

I certify that all information provided by me in this application is true and complete to the best of my knowledge. I understand that any misstatement, omission, falsification, or factual misrepresentation in this application may disqualify me from consideration for employment or, if hired, may result in disciplinary action up to and including termination of employment.

I acknowledge and agree that this application is not a contract or a legal guarantee of employment. If hired by WSI, I understand that my employment will be at will and not for any specific term, and that either I or WSI may terminate my employment at any time, with or without reason or advance notice. I further understand that no employee or representative of WSI, other than Stephanie Weaver or Andy Weaver, has the authority to enter into any agreement for a specified period of employment, or to make any statement contrary to the provisions outlined above.

If hired, I agree to comply with all rules, regulations, and operating procedures established by WSI.

I have read and fully understand the above statements and I seek employment under those conditions.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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**Applicant: please do not write in this area – for facility use only.**

Management use:

Recommended for employment

Hold for future opening

Not qualified for opening

Comments:

Human Resources use:

References and dates of employment checked:  Yes  No

Recommended for employment

Hold for future opening

Not qualified for opening

Comments:

License verification:  Yes  No Date: \_\_\_\_\_ By whom? \_\_\_\_\_

Method: \_\_\_\_\_ License #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

I-9 form completed:  Yes  No

IRS Form W-4 received:  Yes  No

Start date: \_\_\_\_\_ Position Title: \_\_\_\_\_

Department Name: \_\_\_\_\_

Shift: \_\_\_\_\_ Hours per pay period: \_\_\_\_\_

Salary Grade: \_\_\_\_\_ Starting salary: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Telephone: \_\_\_\_\_