



DRILLING AND SERVICE
SPUDDERS / ROTARY DRILLING

Les Wilson Drilling, Inc.
205 Industrial Avenue
P.O. Box 331
Carmi, IL 62821

Les Wilson Inc.

Application for Employment

Position Desired (Check all that apply.)

Office _____	Rotary Tool Pusher _____
Yard Hand _____	Rotary Driller _____
Truck Driver _____	Rotary Roughneck _____
Spudder Driller _____	Spudder Tool Dresser _____
Other _____	Welder _____

Personal Information

Name _____

Home Phone _____

Address _____

Other Phone _____

City, State _____

Social Security # _____

Driver's License # _____ State Issued _____

C. D. L. Yes or No (circle one)

Date Available for Work _____

Do you work for the union Yes or No (circle one)

Name & Location of School

Completion Date

Grade School

High School

College

Previous Employment *(Minimum of past 2 years)*

Company Name _____

Telephone # _____

Address _____

Dates Employed _____ to _____

Name of Supervisor _____

Rate of Pay _____

Job Title & Description _____

Reason for Leaving _____

Company Name _____

Telephone # _____

Address _____

Dates Employed _____ to _____

Name of Supervisor _____

Rate of Pay _____

Job Title & Description _____

Reason for Leaving _____

Previous Employment *(Continued)*

Company Name

Telephone #

Address

Dates Employed _____ to _____

Name of Supervisor _____

Rate of Pay

Job Title & Description

Reason for Leaving

Company Name

Telephone #

Address

Dates Employed _____ to _____

Name of Supervisor _____

Rate of Pay

Job Title & Description

Reason for Leaving

EQUAL OPPORTUNITY EMPLOYER

Les Wilson, Inc. does not discriminate on the basis of race, religion, age, gender, national origin or disability.

POST-OFFER, PRE-EMPLOYMENT DRUG TESTING REQUIRED FOR EMPLOYMENT

INCOMPLETE APPLICATIONS FOR EMPLOYMENT WILL NOT BE CONSIDERED

I UNDERSTAND THAT THIS APPLICATION WILL BE ACCEPTED BY THE COMPANY SUBJECT TO THE FOLLOWING CONDITIONS:

1. I voluntarily give the Employer the right to conduct reference checks. I authorize schools, references, prior employers and physicians and other medical practitioners to provide my records, reasons for leaving employment and any other information concerning me to Les Wilson, Inc. I release such parties from all liability for claims for damages, which I may or shall have against them for supplying such information.
2. I consent to take a post-offer drug test. An offer of employment may be contingent upon passing a post-offer drug test. A provider selected and paid for by the Company will conduct the drug test at the Company's expense if you fail a test with the company you are responsible for the pay.
3. I understand and agree that I must produce applicable documents showing that I am a United States citizen or alien lawfully authorized to work in the United States, within the time frame specified by the Company, to meet the Immigration Reform and Control Act of 1986 requirements. If I fail to comply with any of the requirements set forth above, I understand that an offer of employment will be rescinded or my employment will be terminated.

Signature _____

Date _____