



## APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

Integrity Gas Services, LLC, LLC is pleased that you are interested in applying for employment. Integrity Gas Services, LLC, LLC does not discriminate on the basis of race, color, religion, national origin, gender, age, veteran status, sexual orientation or disability. No question on this form is intended to secure information to be used for such discrimination.

We will give this application every consideration. Integrity Gas Services, LLC, LLC makes no commitment of employment to the applicant by acceptance of this application. Application must be completed in full.

If you need special assistance or accommodation to participate in the application process (e.g. taking a pre-employment test or participating in an interview), you may request such assistance.

FULL LEGAL NAME	LAST	FIRST	MIDDLE
PRESENT ADDRESS	NUMBER / STREET	APT. NO.	CITY STATE / ZIP
PERMANENT ADDRESS (If different from above)	NUMBER / STREET	APT. NO.	CITY STATE / ZIP
EMAIL ADDRESS	TELEPHONE NUMBER (Home)		<input type="checkbox"/> Preferred contact number
TELEPHONE NUMBER (Work)	<input type="checkbox"/> Preferred contact number	TELEPHONE NUMBER (Alternate/Cellular)	<input type="checkbox"/> Preferred contact number

POSITION DESIRED	Position requires working rotating shifts at the work location.	DATE AVAILABLE
CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF ELIGIBILITY TO BE EMPLOYED IN THE UNITED STATES?		CAN YOU WORK OVERTIME?
Yes    No    If no, please explain.		Yes    No
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES?	Yes	No
WILL YOU NOW OR IN THE FUTURE REQUIRE SPONSORSHIP FOR AN IMMIGRATION-RELATED EMPLOYMENT BENEFIT? (H-1B visa, O-1 visa, E-3 visa petition or TN status)	Yes	No
How were you referred? Advertisement      Job Fair Agency/Search      Internet Site		Other
Employee Referral (name) _____		

HAVE YOU EVER BEEN EMPLOYED BY INTEGRITY GAS SERVICES, LLC OR ANY COMPANY AFFILIATED WITH INTEGRITY GAS SERVICES, LLC?	IF YES, COMPANY NAME	EMPLOYMENT DATES
Yes      No		
JOB TITLE / DEPARTMENT	EMPLOYEE NUMBER AND NAME EMPLOYED UNDER IF DIFFERENT THAN CURRENT NAME.	
REASON FOR LEAVING		
DO YOU HAVE ANY RELATIVES EMPLOYED BY INTEGRITY GAS SERVICES, LLC?	IF YES, NAME OF RELATIVE(S) AND RELATIONSHIP	
Yes      No		

## GENERAL INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A CRIME OR AGREED TO ENTER INTO A DEFERRED ADJUDICATION OR SIMILAR PROGRAM IN CONNECTION WITH THE PROSECUTION OF A CRIMINAL OFFENSE? (Including DWI or Non-Traffic offense)

NOTE: To include all felony and misdemeanor convictions and all convictions in state and federal courts regardless of whether it may or may not appear on your current record.

Yes

No

IF YES, EXPLAIN ALL OCCURRENCES, INCLUDING DATES IN DETAIL. INCLUDE SEPARATE SHEET OF PAPER IF NECESSARY. NUMBER OF ATTACHMENTS \_\_\_\_\_

INCIDENT	CITY	STATE	DATE (Month/Year)
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INCIDENT	CITY	STATE	DATE (Month/Year)

HAVE YOU EVER BEEN TERMINATED, DISCHARGED, LAID OFF OR ASKED TO RESIGN BY A PREVIOUS EMPLOYER?

Yes

No

IF YES, LIST EMPLOYERS, DATES AND CIRCUMSTANCE:

HAVE YOU EVER BEEN REFUSED A BOND?

Yes

No

## EDUCATIONAL BACKGROUND

List institutions attended. List degrees actually received and grades successfully completed. If necessary attach additional sheet(s).

LEVEL	SCHOOL OR INSTITUTION		Did you Graduate?	Graduated/Completed	Degree Earned/Major
HIGH SCHOOL	Name	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	Month/Year	
	City	State Zip		Month/Year	
G.E.D. High School Equivalency	Name	Phone		Month/Year	
	City	State Zip		Month/Year	
UNDER-GRADUATE	Name	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	Month/Year	
	City	State Zip		Month/Year	
GRADUATE	Name	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	Month/Year	
	City	State Zip		Month/Year	
POST GRADUATE	Name	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	Month/Year	
	City	State Zip		Month/Year	
BUSINESS TRADE	Name	Phone	<input type="checkbox"/> Yes <input type="checkbox"/> No	Month/Year	
	City	State Zip		Month/Year	
OTHER	Name	Phone		Month/Year	
	City	State Zip		Month/Year	

HOURS OR CREDITS TOWARD A DEGREE NOT YET COMPLETED \_\_\_\_\_

## SPECIALIZED SKILLS OR CERTIFICATIONS

Do you have a current CDL?  Yes  No Endorsements? \_\_\_\_\_

STATUS OF LICENSE

CDL License/State Issuing \_\_\_\_\_

Current  Expired

Driver's License/State Issuing \_\_\_\_\_

Current  Expired

List any training, skills, aptitudes and qualifications which you feel are relevant to the type of employment you are seeking. Include computer skills and software applications.

# EMPLOYMENT

List every job held for the past (10) ten years. Start with present or most recent job.

If you are now working, may we contact your present employer?    **YES**    **NO**

May we contact you at work?    **YES**    **NO**

HAVE YOU EVER WORKED UNDER OR USED ANOTHER NAME? Yes      No	IF YES, PLEASE PROVIDE OTHER NAME(S) AND DATES			
	OTHER NAME	MONTH/YEAR	OTHER NAME	MONT

<b>From To</b> <b>Mo. Yr. Mo. Yr.</b>	COMPANY NAME  CITY    STATE    ZIP	TITLE  REASON FOR LEAVING                          Voluntary                          Involuntary
<b>Salary</b> <b>Start      End</b>	SUPERVISOR NAME  TELEPHONE NUMBER	Were you ever employed in a safety sensitive function subject to DOT Drug & Alcohol testing? Were you subject to Federal Carrier Safety Regulations?                          Yes                          No
<b>From To</b> <b>Mo. Yr. Mo. Yr.</b>	COMPANY NAME  CITY    STATE    ZIP	TITLE  REASON FOR LEAVING                          Voluntary                          Involuntary
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Please account for all unemployment time of one month or more since leaving school or between periods of employment.		Please use separate sheet (s) if necessary. Number of attached sheets. _____

FROM (Month / Year)	TO (Month / Year)	EXPLANATION
FROM (Month / Year)	TO (Month / Year)	EXPLANATION

## MILITARY BACKGROUND

BRANCH OF SERVICE / RESERVE OR NATIONAL GUARD	DATES OF SERVICE From (MM/DD/YYYY)                      To (MM/DD/YYYY)	LAST RANK (officer) / RATE (enlisted)
CLASSIFICATION DISCHARGE	IF OTHER THAN HONORABLE, PLEASE PROVIDE EXPLANATION	

### READ CAREFULLY BEFORE SIGNING

Application for Employment forms are valid for a period of six (6) months.

I verify that all of the information provided by me on this application and in exhibits and resumes is true, correct and complete. I have not knowingly withheld any information requested on this application. I understand that false, misleading, incomplete or omitted information on this application, exhibits or resumes will result in rejection of my application or dismissal if hired by Integrity Gas Services, LLC. There is no time limit regarding the above mentioned items.

I authorize Integrity Gas Services, LLC and its agents to verify the information on this application and in exhibits and resumes and to conduct an investigation regarding my suitability for employment. I release Integrity Gas Services, LLC, its agents and all persons and companies from any claims, liabilities or damages for requesting or providing any information about me.

I understand that this application is not intended as a job offer or contract of employment. If hired, my employment will not be for any specific time period and I may resign or be terminated at any time with or without notice or with or without cause.

I understand that if employed, I will be required to complete a Federal Form I-9 Employment Eligibility Verification and to provide verification and identification related to my eligibility to work in the United States.

If I am extended a conditional employment offer by Integrity Gas Services, LLC, I will be requested to submit to a drug screen and/or alcohol and a physical (if needed). The results of these screens will be communicated to Integrity Gas Services, LLC and used in determining my suitability for employment. If I refuse to have the screens or release the results of the screens to Integrity Gas Services, LLC, I will not be considered further for employment.

I agree to abide by all policies and rules of Integrity Gas Services, LLC.

APPLICANT'S (Signature)	DATE:
APPLICANT'S FULL LEGAL NAME (PRINT)	