

Job Application

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Number: (____) _____

Email Address: _____

Can you perform the essential functions of the position for which you are applying?

YES [] NO []

If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)

When would you be available to begin work? _____

Are you legally eligible to be employed in the United States? YES [] NO []

(Proof of identity and eligibility will be required upon employment)

Have you ever worked for this Company before? YES [] NO []

If yes, where? _____ When? (Give dates) _____ Job Title:

Are you being referred by anyone currently working at OWL SWD Operating, LLC?

YES [] NO [] If yes, Name: _____

Are you available to work: DAYS NIGHTS WEEKENDS FULL TIME If you cannot work full time, please explain:

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

IMPORTANT, PLEASE READ AND SIGN

I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Application for Employment can result in disqualification for employment consideration or, if hired, may be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

Signed: _____

Do not write below this line

RESULTS

Employed: YES NO

If Yes, Job Title: _____ Department _____

Date beginning Employment _____ Compensation \$ _____ per _____

Interviewed by: _____ Date: _____