

CLM ENERGY SERVICES, LLC

APPLICATION FOR EMPLOYMENT

"Equal Opportunity Employer"

Instructions to Applicant:

Please fill in all spaces. If an item does not apply, write "N/A." This application will not be valid and processed unless completed in full by the applicant. You must identify the specific position for which you are applying as this application only applies to that position. This application is only active for thirty (30) days from the date of the application. If you have not been contacted or employed within this thirty (30) day period, you must reapply to be considered for any additional openings.

Please print or type in ink clearly. Provide only the information requested. You must complete your own application. Applications may not be taken/completed off premises. Failure to do any of the above will result in disqualification of your application.

Name _____ Social Security No. _____ - _____ - _____
 LAST FIRST MIDDLE

Present address _____
 - _____
 NUMBER AND STREET APT. CITY STATE ZIP CODE TELEPHONE

Position applying for: [Be specific.] _____

From your review of the job functions for the position for which you are applying, are you able to perform the essential functions of the job with or without reasonable accommodation? _____ Yes _____ No

Wage or salary desired: \$ _____ Date available to begin work: _____

Is there any time of the day or night, or particular days of the week, including weekends, that you are unable to work?

_____ Yes _____ No If yes, state when: _____

Type of employment desired: Full time _____ Part time _____ Summer _____

If part-time, please state the number of hours and what days you are available to work: _____

Is there any reason you could not be at work regularly on time? _____

How were you referred for employment? Ad _____ Employment Security Division _____ Employee _____ School _____ Other _____

Are you willing to work overtime? _____ Yes _____ No

Are you presently employed? _____ Yes _____ No Why do you wish to change jobs? _____

Do you have the legal right to work in the United States? _____ Yes _____ No Are you of legal age to work? _____ Yes _____ No

(If hired, proof of status will be required.)

Have you ever been convicted of a crime by a civilian or military court (other than a minor traffic violation?) _____ Yes _____ No

If so, give details: _____

(Conviction of a crime is not an automatic bar to employment. All circumstances will be considered.)

EMPLOYMENT HISTORY - List all work history, beginning with the most recent. Include period(s) of military service. Use additional pages if necessary. If any information is not recalled, so note.

1. Dates Worked: From _____ To _____ / Last salary: _____

Employer's Name _____ / Current/Last Job Title and Duties _____

Employer's Address _____ Street _____ / _____

City _____ State _____ Zip _____ / _____

Supervisor's Name _____ / Reason for Leaving _____

2. Dates Worked: From _____ To _____ / Last Salary: _____

Employer's Name _____ / Your Job Title and Duties _____

Employer's Address _____ Street _____ / _____

City _____ State _____ Zip _____ / _____

Supervisor's Name _____ / Reason for Leaving _____

Please account for all periods of unemployment longer than three (3) months:

IF YOU ARE APPLYING FOR A CLERICAL POSITION, PLEASE COMPLETE THE FOLLOWING:

Do you have experience with computers? _____ Yes _____ No If yes, list type and amount: _____

/ / Typing: WPM _____

If position requires driving, please provide the following information: Do you have a valid Arkansas driver=s license? Yes No

Driver=s License # _____ Has your driver=s license ever been revoked? Yes No

Have you had any traffic violations or accidents in the last 3 years? Yes No If yes, provide details _____

EDUCATION

	NAME AND ADDRESS OF SCHOOL	COURSE OF STUDY	YEAR COMPLETED	GRADUATED?	DEGREE
High School	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____
	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____
College	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____
	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____
Other	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____
	_____ / _____ / _____	_____ / _____ / _____	_____ / _____ / _____	_____ Yes / _____ No	_____ / _____

SKILLS AND TRAINING

Check the following which you can operate or have knowledge:

Machine Operator ___ Forklift ___ Shipping & Receiving ___ Personal Computer ___ Spreadsheet Software ___ Word Processing ___

Identify special training, machines or software in which you have skills, ability or certification: _____

Is any additional information necessary to enable a check of your records such as a change of name, use of an assumed name or nickname? _____ Yes _____ No

If yes, please explain:

If hired, would you be willing to perform other jobs as needed? _____

All applicants are considered for employment without regard to race, color, sex, age, religion, national origin, disability, or military veteran status.

IMPORTANT: READ CAREFULLY

I hereby authorize all of my prior employers, the officials of all schools which I have attended or been associated with, any person named above on this application blank, all public officials, and any other person or entity to give any information regarding my employment, personal habits, ability, criminal record, or any other relevant information they may have regarding me whether or not it is on their records. I hereby release said employers, schools, public officials and other persons and entities, from any and all liability for any damage whatsoever which might result from their revealing or furnishing this information.

I understand and accept that as part of the application and employment process, and/or during employment with the Company, I may be asked to submit to physical examinations which may include testing for alcohol and drugs, and/or be fingerprinted, all in accordance with law. By signing this application, I hereby agree to submit to such examinations and release all persons and companies from any liability arising out of such examinations, tests and fingerprinting. I further agree that the examining person may disclose to the Company or its representative the results of same.

If employed, I agree to conform to all policies, practices and procedures of CLM Energy Services, LLC and acknowledge that these may be changed, interpreted, withdrawn, or amended by the Company at any time, at the Company's sole option and without any prior notice to me. I consent and agree that the Company shall have the right to search my personal property located on its property, along with the Company's desks, closets, et cetera, for the purpose of investigating possible violations of its rules/policies. This also includes access to my telephone conversations and e-mails or other types of electronic communications.

I further acknowledge that my employment, or any offer of employment, if such is made, may be terminated, with or without cause, and with or without prior notice, at any time, even after acceptance, at the option of the Company or myself. I understand that no representative of the Company has any authority to enter into any agreement with me of any nature and do hereby state that none has so been asserted to me by anyone.

I HEREBY STATE THAT ALL FACTS GIVEN ARE CORRECT TO THE BEST OF MY KNOWLEDGE AND ANY MISREPRESENTATION OR OMISSION ON MY PART IS CAUSE FOR REJECTION OR TERMINATION.

Signature of applicant

Date