



Ener-Tel Services I, LLC.  
APPLICATION FOR EMPLOYMENT

Date Received: \_\_\_\_\_  
Received by: \_\_\_\_\_

For Company Use Only

These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA." **Do not leave questions blank.** Be sure to sign when completed. Ener-Tel Services is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment. **This application must be signed. Resumes will not be accepted in lieu of applications,** but can be attached to the application.

NAME \_\_\_\_\_ ( )  
Last First Middle Daytime Phone

ADDRESS \_\_\_\_\_  
Street City State Zip

EMAIL ADDRESS \_\_\_\_\_ ( )  
Other Phone

List any names used other than name on this application: \_\_\_\_\_

List position or type of work for which you wish to apply: \_\_\_\_\_

How did you hear about our open position? \_\_\_\_\_

Full-Time ☐ Part-Time ☐ Date available for work? \_\_\_\_\_ Are you at least 18 years of age? Yes ☐ No ☐

Are you employed right now? Yes ☐ No ☐ If so, can we contact your present employer? Yes ☐ No ☐

Are you willing to travel if required by this position? Yes ☐ No ☐ What is your desired salary? \_\_\_\_\_

**Have you ever been convicted of a misdemeanor and/or felony or subjected to deferred adjudication on a felony charge? Yes ☐ No ☐**

If your answer is "Yes," explain in concise detail on a separate page, giving dates and nature of the offense, name and location of the court, and disposition of the case(s). A conviction may not disqualify you from employment, but a false statement will.

**EDUCATION (NOTE: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications, and registrations.)**

High School Graduate or GED? Yes ☐ No ☐

If yes, name and location of high school or GED institute: \_\_\_\_\_

Type of School	Name and Location of School	Did you graduate?	Degree and Discipline
Undergraduate Colleges or Universities			
Graduate Schools			
Technical or Vocational Schools			

## Employment History

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summaries of experience should clearly describe your qualifications.

1. Include up to 10 years of employment. Begin with your current or last position and work back. Employment history should include each position held, even those with the same employer.
2. Employer addresses must be complete mailing addresses, including zip code.
3. Answer all questions and completely summarize your experience including technical and managerial responsibilities and any special training, skills, and qualifications for each position you have held.

If you need additional space to adequately describe your employment history, you may use this employment history sheet or attach a typed employment history providing the same information in the same format as this application form.

### EMPLOYER (include full address):

					Non-Managerial Supervisory Managerial Technical	Full Time Part Time Summer Temp/Project
Telephone Number:						
Starting Date		Leaving Date		Position Title	Supervisor's Name	
Mo.	Yr.	Mo.	Yr.			
				Current/Final Salary		
Summary of experience including special training/skills/qualifications you have used in the performance of this job:						
Specific reason for leaving:						

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					Non-Managerial Supervisory Managerial Technical	Full Time Part Time Summer Temp/Project
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Starting Date		Leaving Date		Position Title	Supervisor's Name	
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**EMPLOYER (include full address):**

					Non-Managerial Supervisory Managerial Technical	Full Time Part Time Summer Temp/Project
Telephone Number:						Supervisor's Name
Starting Date		Leaving Date		Position Title		
Mo.	Yr.	Mo.	Yr.			
				Current/Final Salary		
Summary of experience including special training/skills/qualifications you have used in the performance of this job:						
Specific reason for leaving:						

**EMPLOYER (include full address):**

					Non-Managerial Supervisory Managerial Technical	Full Time Part Time Summer Temp/Project
Telephone Number:						Supervisor's Name
Starting Date		Leaving Date		Position Title		
Mo.	Yr.	Mo.	Yr.			
				Current/Final Salary		
Summary of experience including special training/skills/qualifications you have used in the performance of this job:						
Specific reason for leaving:						

Have you ever been employed by Ener-Tel Services? Yes ☐ No ☐

Please list date and position: \_\_\_\_\_

**MILITARY SERVICE** (A copy of a report of separation from the Armed Services will be required upon employment.)

Are you a veteran? Yes ☐ No ☐ If yes, list type of discharge \_\_\_\_\_

LICENSE/CERTIFICATION	Date Issued	Date Expires	Issued by/Location of Issuing Authority	License Number

**Special Training/Skills/Qualifications:** List all job related training or skills you possess. Include equipment and specialty tools such as forklift, electronic meters, etc. (Attach additional page, if necessary.)

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List all job related software programs you have used. Indicate proficiency level (i.e. fair, good, excellent).

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Do you speak a language other than English?      Yes ☐ No ☐

If yes, which language(s) do you speak? \_\_\_\_\_ How fluently? Fair ☐ Good ☐ Excellent ☐

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR  
UNDERSTANDING BY INITIALING AFTER EACH STATEMENT AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED**

I certify that all the information provided by me in connection with my application, whether on this document or not, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination. \_\_\_\_\_

I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S. \_\_\_\_\_

I understand that Ener-Tel WILL check with the Texas Department of Public Safety, the Federal Bureau of Investigation or other organizations, for any criminal history in accordance with applicable statutes. \_\_\_\_\_

I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they may have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you. \_\_\_\_\_

**THIS APPLICATION MUST BE SIGNED SIGN HERE: X**

Signature – Applicant	Date
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### AUTHORIZATION AND RELEASE TO OBTAIN INFORMATION

Under the Fair Credit Reporting Act ("FCRA"), 15 U.S.C., § 1681 et seq., the regulations applicable to the federal Department of Transportation's Federal Motor Carriers Safety Administration, including 49 CFR § 40.329, the Americans with Disabilities Act and all other applicable federal, state and local laws, I hereby authorize and permit Ener-Tel Services I, LLC to obtain information, where permitted, pertaining to my employment records, driving history records, driving performance and safety history, criminal history, credit history, civil records, workers' compensation (post-offer only), alcohol and drug testing, verification of my academic and/or professional credentials, and information and/or copies of documents from any military service records.

I understand that an "investigative consumer report" may result that could include information as to my character, general reputation, personal characteristics, and mode of living that may be obtained by interviews with individuals with whom I am acquainted or who may have knowledge concerning any such items of information. I specifically authorize the release of information by my former employers for the purpose of satisfying driver qualification regulations. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address and telephone number of the consumer reporting agency and a summary of your rights under the FCRA.

By signing below, I consent to and authorize the gathering of this information by my prospective employer and those whom my prospective employer has engaged to request and obtain this information, including from former employers and/or from or through IIX, a unit of ISO Claim Services, Inc.. I hereby release and hold harmless any person, firm, or entity, including IIX, that discloses matters in accordance with this authorization from liability that might otherwise result from the request for use of and/or disclosure of any or all of the information discussed above. This information may be obtained in whole or in part by IIX or its agents. IIX, a unit of ISO Claim Services, Inc. can be contacted by mail at 1716 Briarcrest Drive, Suite 200, Bryan, TX 77802; or phone: 800-299-7099; or website: [www.iix.com](http://www.iix.com)

I consent to and authorize the processing of my information in a foreign country by persons providing services to my prospective employer and understand that this information may be accessible to law enforcement and national security authorities of that jurisdiction.

I understand and acknowledge that this release of information may assist my prospective employer to make a determination regarding my suitability as an employee. I further understand that under the FCRA, I may request a copy of any consumer report from the consumer reporting agency that compiled the report, after I have provided proper identification. I agree that a copy of this authorization has the same effect as an original. Where permitted, this authorization shall remain in effect over the course of my employment and reports may be ordered periodically during the course of my employment.

Applicant's Name \_\_\_\_\_  
(please print clearly)      First      Middle      Last

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_

Social Security Number \_\_\_\_\_

Birth Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_