



Brinkerhoff Inspection Inc.

Employment Application

Applicant Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit #

City State ZIP Code

Phone: Email

Date Available: Social Security No.: Desired Salary:\$

Position Applied for:

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when?

Have you ever been convicted of a felony? YES NO

If yes, explain:

Education

High School: Address:

From: To: Did you graduate? YES NO Diploma:

College: Address:

From: To: Did you graduate? YES NO Degree:

Other: Address:

From: To: Did you graduate? YES NO Degree:

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Are you 18 years of age or older? YES NO

Do you have oil field experience? YES NO

List any certifications related to the job you are applying for?

Are you able to perform the essential functions of the position for which you are applying for with or without accommodations? YES NO

Do you have a valid Driver's License? YES NO

Do you have reliable transportation? YES NO

Do you currently reside in Midland/Odessa? YES NO

How did you learn about our company?

How long have you had your current smart phone number? NA <1yr 1-2yrs 2-5yrs 5+yrs

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

I understand that by filling out this application does not constitute a promise or guarantee of employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

If employed by SMOB Services I agree to abide by its rules and regulations.

I hereby authorize all persons, companies, and corporations to release and provide any and all information regarding my employment to SMOB Services and release SMOB Services from all liabilities for issuing this information.

Signature: _____ Date: _____

Thank you for investing time in completing the application and giving us the opportunity to learn about your skills and experience. If your qualifications meet our current needs, you will be contacted by one of our managers to discuss the next steps.