



APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. Applicants for all job openings are welcome and will be considered without regard to race, color, religion, national origin, sex, age, sexual orientation, physical or mental disability, or any other basis protected by state, federal or local law. It is the intent of the Company to comply with all applicable federal, state and local legislation concerning equal opportunity in employment.

To help us learn about your experiences, abilities and interests, please complete this Application for Employment as thoroughly as possible.

PERSONAL INFORMATION

| | | |
|---|--|-------------------------------------|
| NAME: Please PRINT or TYPE | | Home Telephone No. () - |
| ADDRESS: Street Number, City, State and ZIP | Number of years at address | Other Number () - |
| PREVIOUS ADDRESS: Street Number, City, State and Zip | | Number of years at residence |
| Can you, after employment, submit verification of your legal right to work in the United States? | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Are you over 18? | If hired, do you have reliable means of transportation to get to work? | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Have you ever been convicted of a felony? If yes, please explain. (A conviction will not necessarily disqualify you from employment.) | | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

EMPLOYMENT DESIRED

| | | |
|---|--|--|
| Type of POSITION desired: | Date Available: | Salary desired: |
| Are you presently employed? | | If yes, may we contact your present employer? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Have you every applied with this company before? | Have you ever been employed with this company before? | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| How were you referred to the Company? (Check all that apply) | | |
| <input type="checkbox"/> Advertisement (Please identify) <input type="checkbox"/> Employee Referral (Please identify) <input type="checkbox"/> Agency <input type="checkbox"/> Walk-in <input type="checkbox"/> Other (Please identify) | | |
| | | |

EDUCATION and TRAINING

| School Name and Location | Years Attended From To | Did you graduate? (yes/no) | What degree? | Major/Subject Total Hours (if applicable) |
|--|--|--|--------------|--|
| Elementary | | | | |
| High School | | | | |
| College/University | | | | |
| College/University | | | | |
| Highest degree earned | | | | Overall Scholastic average |
| (please circle) 1. High School 2. Associate 3. Bachelor 4. Master 5. Doctorate | | | | _____ |
| Additional Education: Please list any vocational and/or professional information such as special areas of research or study, seminars, etc. that might be relevant to the position for which you are applying. Please attach any written resume or other summary of information deemed necessary. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills below. | | | | |
| | | | | |
| Professional memberships, certifications or licenses held. (Exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations.) | | | | |
| | | | | |
| <input type="checkbox"/> Typing WPM: _____ | | <input type="checkbox"/> Computer Skills | | <input type="checkbox"/> Other machines requiring special skills |

U.S. MILITARY SERVICE

| |
|----------------------------------|
| Branch: |
| List Special Training or Skills: |

REFERENCE DATA

Professional/Work References

| | | |
|------|---------|-------------------------------|
| Name | Address | Phone Number () - |
| | | |
| Name | Address | Phone Number () - |
| | | |
| Name | Address | Phone Number () - |
| | | |
| Name | Address | Phone Number () - |
| | | |

PRE-EMPLOYMENT CERTIFICATION

I understand that this application is only valid for the position listed in this application at the present time and that the Company is not obligated to retain or consider this application for future opening.

_____Initial

I authorize investigation of all statements contained within this application. I understand that falsification, misrepresentation or omission of facts called for will result in immediate termination from employment or the removal of my application from consideration. I authorize the Company to secure information about my experiences with former employers, employees, educational institutions and agencies and for those parties to provide information concerning my experience releasing all parties from liability arising therefore.

_____Initial

If employed by the Company, I will abide by the Company policies and rules. I understand that I will be required to possess a current and valid driver's license if my position requires me to drive in the course of my work.

_____Initial

If I am offered employment, I understand and agree that I may be required to undergo a physical examination at the Company's expense and that my offer of employment may be conditioned by that examination. I agree to authorize the release of all results or information obtained from such physical examinations.

_____Initial

I agree to submit to legally permissible drug and/or alcohol testing upon request by the Company. I recognize that the results of these tests may be used to determine my employment or continued employment. I understand and expressly agree that if employed by the Company, storage areas provided for me (locker, desk, etc.) are open to investigation by the Company without prior notice to me with my presence.

_____Initial

If I am employed by the Company, I understand that I can be terminated, with or without cause and with or without notice, at any time at the option of the Company or myself. I understand that other than the President of the Company, no manager, supervisor or representative of the Company has the authority to enter into any agreement for any specific time, or to make any agreement to the foregoing. Only the President of the Company has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that with respect to the at-will employment relationship, which constitutes the full, complete and final expression of the party's intent concerning the nature of any employment relationship between myself and the Company.

_____ Initial

I understand that the Company shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedure, benefits or other terms or conditions of my employment.

_____ Initial

CONFIRMATION PAGE

My signature below certifies that I have read and understand the foregoing and to the best of my knowledge and belief, the information on this form is true and correct.

My signature below indicates that I agree to and be bound by the terms and conditions stated in this application. This application contains all the understandings and agreements between me and the Company concerning the nature of my employment, if any, by the Company and supersedes all prior and/or contemporaneous practices, oral or written agreements, understanding, statements, representations and promises, express or implied, between me and the Company. I understand and agree that, except as noted above, no person who is either an agent or employee of the Company may modify, delete, vary or contradict, whether orally or in writing, the terms and conditions set forth herein.

Applicant Signature

Date of Application

FOR EMPLOYMENT DEPARTMENT USE ONLY

Interviewer's signature

Date

SUPPLEMENT TO APPLICATION

1. Are you currently employed by a Sugarland Enterprises entity? – see below:

YES NO



**SHERIDAN, CASPER,
CHEYENNE, LARAMIE, &
GILLETTE



(Employed prior to April 2010)



(in Sheridan)



(in Sheridan)

2. Have you been employed at any Sugarland Enterprises entity in the LAST 5 YEARS?

YES NO

If yes – please indicate the company name and dates of employment below.
