

# EMPLOYMENT APPLICATION

**Sargent Drilling Company**  
P.O. Box 367, Geneva, NE 68361

## APPLICANT INSTRUCTIONS

If you need help filling out this application form, please notify the person that gave you this form.

1. Please read APPLICANT NOTE below.
2. Complete both pages.
3. If more space is needed, use the Comments Section at the bottom of this page.
4. Print clearly. Incomplete or illegible forms will not be processed.
5. If a Section is Not Applicable, please write Not Applicable.
6. Provide only the information requested. Failure to do so may disqualify you from employment with this company.

TODAY'S DATE: \_\_\_\_\_

NAME: \_\_\_\_\_  
FIRST NAME MIDDLE INITIAL LAST NAME

CURRENT ADDRESS: \_\_\_\_\_  
STREET  
CITY STATE ZIP CODE

TELEPHONE NUMBER: \_\_\_\_\_

PRIOR ADDRESS: \_\_\_\_\_  
STREET  
CITY STATE ZIP CODE

**APPLICANT NOTE :** This application form is intended solely to evaluate your qualifications for employment with Sargent Irrigation Co. This is not an employment contract. Please read and accurately answer all questions. Any incorrect or incomplete statements on this application or during the interview process may result in rejection of your application or discharge if discovered after you are hired. All applicants are considered for employment without regard to race, color, religion, national origin, gender, age (except where minimum ages are required), marital status, or status as a qualified individual with a disability. Additional job-related testing may be required prior to employment. Conditional offers of employment may be subject to successful completion of drug screening and/or a physical examination and medical review.

**AVAILABILITY** POSITION APPLYING FOR: \_\_\_\_\_

WHEN CAN YOU BEGIN WORK: \_\_\_\_\_ WOULD YOU PREFER: FULL TIME PART TIME TEMPORARY WORK  
YOU AVAILABLE TO WORK AT THE FOLLOWING TIMES: WEEKDAYS WEEKENDS EVENINGS OVERTIME NIGHTS

**JOB SKILLS** NOTE: Do not fill out any part of this section you believe to be not job related. Mark it as N/A for Not Applicable.

YES NO IF THE JOB REQUIRES A DRIVER'S LICENSE, DO YOU HAVE A CURRENT AND APPROPRIATE VALID LICENSE?  
NAME ON LICENSE \_\_\_\_\_ DL# \_\_\_\_\_ STATE \_\_\_\_\_

YES NO ANY MOVING VIOLATIONS THE PAST SEVEN YEARS? PLEASE DESCRIBE \_\_\_\_\_

LIST ANY SKILLS, LICENSES, CERTIFICATES, ETC THAT MAY BE JOB RELATED OR WOULD BE OF VALUE TO THIS COMPANY. \_\_\_\_\_

YES NO HAVE YOU BEEN GIVEN A JOB DESCRIPTION OF THE JOB YOU ARE APPLYING FOR?

YES NO DO YOU UNDERSTAND THESE ESSENTIAL JOB FUNCTIONS?

YES NO CAN YOU PERFORM THESE ESSENTIAL JOB FUNCTIONS WITH OR WITHOUT REASONABLE ACCOMMODATION?

**SECURITY** LIST THE STATES AND COUNTIES WHERE YOU HAVE LIVED IN THE PAST SEVEN YEARS :

YES NO HAVE YOU USED ANY NAMES OTHER THAN THE ONE GIVEN ABOVE. IF SO PLEASE DESCRIBE :

YES NO HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF SO, PLEASE LIST BELOW.

NOTE: Conviction will not necessarily eliminate you from consideration for employment.

DATE OF CONVICTION DESCRIPTION CITY AND STATE

## COMMENTS

**PREVIOUS EMPLOYERS**

PLEASE NOTE: Your application will **not** be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the correct company name, city and state, and telephone numbers are crucial.

**MOST RECENT EMPLOYER**

YES NO ARE YOU CURRENTLY WORKING FOR THIS EMPLOYER?  
 YES NO MAY WE CONTACT THIS EMPLOYER?

COMPANY NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
 COMPANY PHONE NUMBER: ( ) -- . COMPANY FAX NUMBER: ( ) - .  
 DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ JOB TITLE \_\_\_\_\_  
 JOB DUTIES: \_\_\_\_\_  
 SALARY: \$ \_\_\_\_\_ REASON FOR LEAVING : \_\_\_\_\_

**SECOND MOST RECENT EMPLOYER**

YES NO ARE YOU CURRENTLY WORKING FOR THIS EMPLOYER?  
 YES NO MAY WE CONTACT THIS EMPLOYER?

COMPANY NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
 COMPANY PHONE NUMBER: ( ) -- . COMPANY FAX NUMBER: ( ) - .  
 DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ JOB TITLE \_\_\_\_\_  
 JOB DUTIES: \_\_\_\_\_  
 SALARY: \$ \_\_\_\_\_ REASON FOR LEAVING : \_\_\_\_\_

**THIRD MOST RECENT EMPLOYER**

YES NO ARE YOU CURRENTLY WORKING FOR THIS EMPLOYER?  
 YES NO MAY WE CONTACT THIS EMPLOYER?

COMPANY NAME: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_  
 COMPANY PHONE NUMBER: ( ) -- . COMPANY FAX NUMBER: ( ) - .  
 DATES EMPLOYED: FROM \_\_\_\_\_ TO \_\_\_\_\_ JOB TITLE \_\_\_\_\_  
 JOB DUTIES: \_\_\_\_\_  
 SALARY: \$ \_\_\_\_\_ REASON FOR LEAVING : \_\_\_\_\_

**REFERENCES:** Include individuals familiar with your work ability or character. Do not include any relatives.

NAME	ADDRESS AND PHONE NUMBER	YEARS KNOWN AND YOUR RELATIONSHIP TO THEM

**EDUCATION** PLEASE CIRCLE THE HIGHEST SCHOOL GRADE COMPLETED 7 8 9 10 11 12 13 14 15 16 16+

HIGH SCHOOL NAME: \_\_\_\_\_ CITY / STATE \_\_\_\_\_ YEAR \_\_\_\_\_  
 COLLEGE NAME: \_\_\_\_\_ CITY / STATE \_\_\_\_\_ YEAR \_\_\_\_\_  
 TRADE SCHOOL: \_\_\_\_\_ CITY / STATE \_\_\_\_\_ YEAR \_\_\_\_\_  
 MILITARY SERVICE: \_\_\_\_\_ ARMED FORCE : \_\_\_\_\_ YEARS \_\_\_\_\_

**CERTIFICATION AND RELEASE** I certify that I have read and understand the "Applicant Note" section on page one of this form and that the answers given by me on this application are accurate and complete. I understand that if I provide any inaccurate or incomplete information on this application form or otherwise in the application process, my application may be rejected or, if employed, my employment may be terminated.

I authorize the company to verify any of the information that I provided. I authorize all former employers, persons, schools, companies, and law enforcement agencies to release any information concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information.

I understand that the use of illegal drugs is prohibited during employment. In accordance with Company policy, I agree to submit to drug testing to detect the use of illegal drugs prior to and during employment.

I understand and agree that employment with the Company, if offered, is at will and may be terminated at any time by me or by the Company with or without notice or cause. I understand and agree that, if I am employed by the Company, from time to time I may receive compensation increases, performance reviews, promotions, demotions, disciplinary action and the like, none of which is intended to alter the at-will nature of my employment with the Company.

**Except in a written agreement signed by me and by the President of the Company, I understand that I should not rely on any statements, promises or representations, written or oral, from anyone in the Company, including a supervisor or a manager, that contradict the Company's right to terminate my employment at any time, with or without notice or cause.**

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_



## Sargent Irrigation and/or Drilling

### Laborer

A laborer may be required to work on drill rigs, pump setter, and test hole rigs. They could be required to operate front end loaders, bulldozers, backhoes, tractors, straight trucks, tractor trailers and/or pickup trucks.

The laborer will be expected to follow all safety rules and regulations as well as any and all other Company rules and regulations. The laborer will be expected to maintain good housekeeping of their work areas as needed. The laborer shall have the ability to follow instructions and work under general supervision. Job tasks may include, but may not be limited to the following; lifting objects including, but not limited to pipe weighing 72 pounds or greater 35 percent of the time, from various levels and on various types of terrain, repetitive use of hand tools up to 50% of the time, including, but not limited to pipe wrenches, mechanic wrenches, screw drivers, shovels, hammers and pry bars, repetitive use of pneumatic and other powered tools up to 50% of the time, use of hazardous materials, including, but not limited to solvents, acids and/or petroleum products, and use an oxy-acetylene torch and/or welder. This job also requires the employee to attach small nuts to bolts repetitively up to 30% of the time. The laborer shall be able to wear all required personal protective equipment including, but not limited to safety glasses, hard hat, hearing protection. The majority of work for a laborer is in an outdoor setting and the laborer may be exposed to hazards associated with outdoor work, including, but not limited to uneven terrain, poisonous plants, insects and/or animals. The laborer may be exposed to temperature extremes for long periods of time and may also be expected to ride in and/or operate a commercial motor vehicle for extensive periods of time throughout the course of employment. This job description is not intended to be inclusive of all job duties and other duties may be required as needed.

Applicants will have the ability to squat, crawl on the ground, an ability to step up at least 3 foot step. Have the ability to lift 95 lbs waist to shoulder height, 95 lbs floor to waist height, carry 95 lbs, push 100 lbs, pull 100 lbs, and have a grip strength of 100 lbs.

**WE  
TEST  
FOR  
DRUGS**