

Application for Employment – Non-DOT

Revision 9 (12/11/18)

Dynasty Wireline Services, LLC, is an equal opportunity employer. The Company's policy is not to discriminate against any applicant or employee based on race, color, sex, age, disability, religion, national origin, military or veteran status or any other basis protected by applicable law.

Answer all questions in their entirety, questions left unanswered will delay the employment process.

| PERSONAL INFORMATION (Please Ty | pe or Print in Ink) | D | ate of Application | on: | | | |
|---|----------------------------------|--------------------|-------------------------|-------------------------|-----------------------------|---------------|----------|
| FULL Legal Name: | | Middle | | | Last | (Suffi | (v) |
| Email Address: | | | Contact Phone | <i>#</i> · | Last | | <i>,</i> |
| Position Applying For: | | | Contact I none | π | | | |
| Do you require a reasonable accommo | | | contial functions | fthisio | h 9 | Yes | No |
| | | | | or this jo | 0? | res | INC |
| Are you legally eligible for employme | | Yes | No | | | | |
| Do you qualify to transport Hazardou (Federal Regulations require any person transpo | | Yes at least 21 | NO years of age.) | | | | |
| Are you of legal age to work: | Yes No | Are th | here any days/hou | rs you ca | <i>innot</i> work: | Yes | No |
| Are you available for full-time work: | Yes No | If yes | , list days/hours y | ou <i>canno</i> | ot work: | | |
| Are you available to travel overnight: | Yes No | Will | you give notice to | your cur | rent employer: | Yes | No |
| Are you available to work overtime: | Yes No | Date | you can begin wo | rk: | | | |
| How did you hear about Dynasty Wir Newspaper Radio So | | If other – p | lease list) | | | | |
| Do you have any family members wh | o work or have worked t | for this co | ompany past/prese | ent? | Yes No | | |
| If Yes, Family Members Name: | | | Work Locatio | on: | | | |
| Have you ever served in the U.S. Arm | ed Forces: Yes No If | yes, list | branch: | | | | |
| Driver's License #: | State: | | Class: | Exp | oires: | | |
| Class / Endorsements (if applicable – CDL | – HazMat - etc.): | | | | | | |
| Address (Please list local current address fir | st. Also provide previous 3 year | s address hi | story – continue on ser | oarate shee | t if you need more r | <u>oom)</u> : | |
| Current Local Mailing Address | | City | | State | | Zip | |
| Current Mailing Address (P.O. Box or if different from above | 2) | City | | State | | Zip | |
| Previous Address | | City | | State | | Zip | |
| Previous Address | | City | | State | | Zip | |
| EDUCATION | Name & Location of Se | chool | Did You Grad | luate | Major Co | | |
| High School | | | Yes | No | If no, did you obtai Yes | n a GED No | ? |
| College | | | Yes | No | | | |
| Trade, Business, Military, Tech School | | | Yes | No | | | |
| List skills or training which will be | e of special benefit for | the posi | tion you are app | <u>lying</u> (P | lease include t | otal y | ears |
| of Wireline Experience) | | | | | | | |
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DYNASTY WIRELINE SERVICES, LLC.

| | STORY (Give a complete | | | | | | |
|---|---|---|--|--|--|--|--|
| | you have been self-employed, l who will drive a regulated vehic | | | | | | |
| the applicant operated such w | ehicle. | _ | | | | | |
| Name: | | | | | | | |
| Address: | | | Dates: From To | | | | |
| City/State: | | | Salary: Starting Ending | | | | |
| Phone #: | | | Check One & State Reason for Leaving | | | | |
| Contact Person: | | | | Layoff Discl | e e | | |
| May We Contact This E | Employer: Yes No | | Other: | | | | |
| Name: | | | Position Held: | | | | |
| Address: | | | Dates: 1 | From | То | | |
| City/State: | | | | Starting | | | |
| | | | Check One & State Reason for Leaving | | | | |
| Contact Person: | | | Layoff Discharge Resign | | | | |
| May We Contact This E | Employer: Yes No | | Other: _ | | | | |
| Name: | | | Position Held: | | | | |
| Address: | | | Dates: From To | | | | |
| City/State: | | | | Starting | | | |
| Phone #: | | | Check One & State Reason for Leaving | | | | |
| Contact Person: | | | Layoff Discharge Resign | | | | |
| May We Contact This Employer: Yes No | | | Other: _ | | | | |
| Name: | | | Position Held: | | | | |
| Address: | | | Dates: From To | | | | |
| City/State: | | | | Salary: Starting Ending | | | |
| Phone #: | | | Check One & State Reason for Leaving | | | | |
| Contact Person: | | | LayoffDischargeResign | | | | |
| May We Contact This Employer: Yes No | | | Other: _ | - | - | | |
| PERSONAL REFER | RENCES (Do not list re | elatives) | | | | | |
| Name | Relationship | Occupa | tion | Years Known | Phone | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| APPLICANT'S STA | TEMENT & ACKNO | WLEDGEN | INT (PLF | ASE READ CAREFUL | LY AND SIGN BELOW) | | |
| I, hereby apply for employ employment are true, comp this application will be suff employed by Dynasty Wire any other corporate recor | ment with DYNASTY WIREI olete and correct. I understa ficient reason for dismissal o cline Services, and it is later ds is misrepresented, omitta | LINE SERVICE and and agree a pr refusal of em discovered inf ed or falsified, | S, LLC, (thuny misrepr ployment. If formation I the compa | e Company). The facts set esentation, false statemen. Furthermore, I understand provided on this applicati ny may immediately term | forth in this application for t or omission of any fact on and agree should I become on or any supplement to or | | |
| employment relationship, e | either in the position applied | for or any othe | r position, d | and regardless of the conte | ents of employee handbooks, | | |

employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, manuals, guidelines, benefit plans, policy statements and any and all polices, or procedures as they may exist or other Company practices shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of the Company. This applicant does not serve to create an actual or implied contract of employment or to confer any rights to remain an employee of the company, or change in any respect the employment-at-will relationship. Both the undersigned and the company may end the employment relationship at any time with or without notice, or reason. No one other than the President of the Company has any authority to enter into any agreement contrary to the foregoing and will be in writing and signed by both parties. I hereby give permission to contact the above listed employers concerning my prior work experience, except as noted above.

Applicant Name (Print): ____

Applicant Signature: _

Notice To Obtain – NOTICE OF INTENT TO OBTAIN CONSUMER REPORTS Acknowledgement, Understanding and Agreement

Applicant/Employee Name: _____ Date:_____

Position: Location: Midland, TX

I acknowledge Dynasty Wireline Services may obtain a consumer report and/or investigative consumer report for employment purposes in compliance with the Fair Credit Reporting Act, 15, 15 U.S.C 1681 et. Deq. concerning my character, employment history, general reputation, personal characteristics, criminal or policy records, motor vehicle records, mode of living, and/or credit and indebtedness. Consumer reports are obtained from third party consumer reporting agencies. A "consumer reporting agency" is a person or business which, for monetary fees, dues or on cooperative nonprofit bases, regularly assembles or evaluates consumer credit information on consumers for the purpose of furnishing consumer reports to others, such as the Company. Investigative consumer reports are gathered from personal interviews with neighbors, friends or co-workers. Upon timely written request to the companies Human Resources Department, the Company will, within five (5) work days of receipt of the written request, authorize the third party consumer reporting agency to disclose the nature and scope of the information sought in the investigative report to the applicant.

Before any adverse employment action is taken in whole or in part as a result of information contained in a consumer or investigative report, I will be provided a copy of the report and a summary of my rights under the Fair Credit Reporting Act. The information obtained from the report will not be used in violation of federal or state equal opportunity of civil rights laws.

Consumer Report Authorization for Employment Purposes

By signing below, I understand authorize Dynasty Wireline Services to obtain a consumer report and/or investigative consumer report and to consider consumer reports and/or investigative consumer reports about me when making decisions regarding my employment with the Company. I understand and agree if I am employed with the Company this authorization shall remain valid and serve as ongoing authorization of the Company to obtain consumer and/or investigative consumer reports on me at any time during my employment. I understand I have a right to make a written request within five (5) business days of the report to receive additional information about the nature and scope of any investigative consumer report obtained and a summary of rights under the Fair Credit Reporting Act.

Name (Print):

Date: _____

Signature: _____

Location: Midland, TX___

DYNASTY WIRELINE SERVICES

Notice to Obtain: MOTOR VEHICLE RECORDS NOTIFICATION / AUTHORIZATION FORM Acknowledgement - (MVR) Request Understand and Agreement

I acknowledge **DYNASTY WIRELINE SERVICES, LLC.**, ("Company") may obtain motor vehicle records and reports as part of the evaluation of my suitability for employment, prior to hiring and annually thereafter. Such records may be obtained by the Company or its insurance representative(s) and may include personal information obtained from state motor vehicle departments, my driving record, an assessment of my insurability for the Company's insurance program, or other consumer reports.

I hereby authorize the Company or the Company's insurance representative(s) or third party vendor to obtain such records and reports as often as necessary in order to evaluate my insurability, comply with Company policy and/or Federal and State law, or as dictated by other necessities, at the sole discretion of Dynasty Wireline Services, LLC.

I further understand an evaluation that is deemed "unacceptable" will prevent me from being eligible to operate a Company vehicle and thus may disqualify me from employment in a position that requires the use of a Company or personal vehicle.

Examples of "unacceptable" items would include but not be limited to:

- a. Two (2) or more moving violations in two (2) years or excessive non-moving violations.
- b. Two (2) or more chargeable accidents within one (1) year Chargeable means it is determined the driver was the primary cause of the incident through speeding, inattention, etc. Contributing factors, such as weather or mechanical problems will be taken into consideration, if the Safety Department confirms there were circumstances outside the employee's control that contributed to the incident.
- c. Violations include any ticket, charge or other law enforcement proceeding relating to these as well as independent evidence of violations deemed relevant by the Safety Department.
- d. Any conviction related to driving under the influence (DUI, DWI) in the previous (3) three years.

| | Date: | | |
|--------------------------|----------------------------------|--|--|
| <u>Please I</u> | Print the Following Information: | | |
| Name: | Job Position: | | |
| Address: | | | |
| City, State, & Zip Code: | | | |
| Driver License Number: | State Issued: | | |
| Date of Expiration: | Class: | | |
| Date of Birth: | Social Security #: | | |
| | | | |

CRIMINAL HISTORY SEARCH FORM

TO BE COMPLETED BY APPLICANT: PLEASE PRINT THE FOLLOWING INFORMATION

Name of Company Conducting search: DYNASTY WIRELINE SERVICES, LLC. Located: P.O. BOX 52076, MIDLAND, TEXAS 79710

| Applicant's Full Legal Name: | | First | Middle | (Maiden) |
|----------------------------------|--------|-------|--------|----------|
| Social Security Number (SSN): | | | | ~ / |
| Date of Birth: Month | | | | |
| | , Dutt | · | | |
| Docket / Case Number (if known): | | | | |
| Date of Conviction: | | | | |
| Place of Conviction: | | | | |
| Charge (convicted for): | | | | |
| | | | | |
| Docket / Case Number (if known): | | | | |
| Date of Conviction: | | | | |
| Place of Conviction: | | | | |
| Charge (convicted for): | | | | |
| | | | | |
| Docket / Case Number (if known): | | | | |
| Date of Conviction: | | | | |
| Place of Conviction: | | | | |
| Charge (convicted for): | | | | |
| | | | | |

Applicant Name (Print):

Signature of Applicant

Background Release Form Disclosure and Consent

In connection with my application for employment (including contract for service) with **Dynasty Wireline Services** ("the Company"), I understand that investigative inquiries may be obtained on myself by a consumer reporting agency, and that any such report will be used solely for employment-related purposes. I understand that the nature and scope of this investigation will include a number of sources including, but not limited to, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, general reputation, personal characteristics, mode of living, and work habits. Information relating to my performance and experience, along with reasons for termination of past employment from previous employers, may also be obtained. Further, I understand that you will be requesting information from various Federal, State, County and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal, civil, education, and other experiences.

I understand that if the Company hires me, it may request a consumer report or an investigative consumer report about me for employment-related purposes during the course of my employment. The scope of this investigation will be the same as the scope of a pre-employment investigation, and that the nature of such an investigation will be my continuing suitability for employment, or whether I possess the minimum qualifications necessary for promotions or transfer to another position. I understand that my consent will apply throughout my employment, unless I revoke or cancel my consent y sending a signed letter or statement to the Company at any time, stating that I revoke my consent and no longer allow the Company to obtain consumer or investigative consumer reports about me.

A **Consumer Report** consist of information deemed to have a bearing on job performance, and may include information from public and private sources, public records, former employers and references. The scope of the report may include information concerning my driving record, civil and criminal court records, credit, education, credentials, identity, past addresses, social security number, previous employment, professional references and personal references.

An **Investigative Consumer Report** is a report based upon interviews that may contain information relating to my character, general reputation, personal characteristics or mode of living.

You have the right to request additional disclosures of the nature and scope of the investigation and a statement of your rights. To receive this information or to inspect any files concerning such a report or to determine if a report on you has been requested, you may contact the Company or Advanced Workplace Strategies, Inc. (*AWSI) (and/or any of their licensed agents) located at 17542 E. 17th Street, Suite 330, Tustin, CA 92780 (714) 731-3084 and <u>www.awsi.com</u>. You may inspect and receive a copy of the report by contacting AWSI. AWSI will then supply you with a copy within 5 business days upon receipt of the request.

Background Release Form Disclosure and Consent

ADDITIONAL STATE LAW NOTICES

California, Minnesota, and Oklahoma Applicants/Employees Only:

Check box to receive a free copy of any requested Consumer Report, Investigative Consumer Report or Credit Report on you.

California: Undersection 1786.22 of the California Civil Code, you may view the file maintained on you by AWSI during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the cost of duplication services, or by appearing in person, during normal business hours and on reasonable notice, or by mail. You may also receive a summary of this file by telephone, upon submitting proper identification. AWSI has trained personnel available to explain your file to you, including any coded information. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification.

Washington State: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washing Fair Credit Reporting Act.

This Disclosure and Consent form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

I authorize without reservation any party or agency contacted by this employer to furnish the above-mentioned information. I hereby consent to your obtaining the above information from Advanced Workplace Strategies, Inc. (and/or any of their licensed agents) located at 17542 E. 17th Street, Suite 330, Tustin, CA 92780 (714) 731-3084. I understand to aid in the proper identification of my file or records the following personal identifiers, as well as other information, is necessary.

□ I have read this agreement and accept all the terms described herein.

| Social Security Number | Date of Birth// |
|--------------------------|-----------------|
| Driver's License Number: | State: |
| Home Phone: | Mobile Phone: |
| Print Name: | |
| Applicant Signature: | Date: |