



FORTIS

ENERGY SERVICES, INC.

APPLICATION FOR EMPLOYMENT

Fortis Energy Services, Inc. is an equal opportunity employer. Applicants are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, presence of a non-job-related disability or any other legally protected status. Michigan law requires that a person with a disability or disability requiring accommodation to perform the essential functions of the job must notify the employer in writing within 182 calendar days of the date that the need is known or should have been known. Federal law has no such requirement.

PERSONAL INFORMATION

Name: _____ Date of Application: _____

Address: _____
(Street)

(City) (State) (Zip)

Telephone Number(s): _____

Are you 18 years or older? Yes No

Are you a citizen of the US or are you legally authorized to work in the US for any company?
(All new hires will be required to provide documentation to comply with I-9 requirements)

Yes No

Do you know anyone who is currently working at Fortis Energy Services or who has been employed with Fortis Energy Services in the past?

Yes No If yes, list names and relationships: _____

Were you referred to Fortis Energy Services?

Yes No If yes by, whom? _____

How did you hear about Fortis? Please check one and list the specific source

___ Job Board (Indeed/CareerBuilder/Monster) _____

___ Social Media (Facebook/Twitter/LinkedIn) _____

___ Referral (Name) _____

___ Other (Please list) _____

Have you been previously employed at Fortis Energy?

Yes No

If yes, please give date(s): _____ Supervisor's Name(s): _____

Reason for leaving: _____

Have you been convicted of a crime which conviction has not been ordered expunged, sealed or impounded by a court of competent jurisdiction? If so, list when and the nature of the offense and whether or not there are any probationary or other restrictions placed upon you.

Yes No

Explanation:

Note: Criminal convictions will not absolutely prohibit employment but will be considered in relation to the specific job requirements, work environment and other factors the Company deems appropriate.

Do you have a trade secret, confidentiality or non-compete obligation(s) with present or previous Employers? If yes, please provide detailed information.

Yes No

Explanation:

Note: The Company will not solicit or accept from you trade secrets, proprietary or confidential information from any previous employer.

EMPLOYMENT DESIRED

Position(s) Applying for: _____

Kind of Work Sought: Full Time _____ Part Time _____ Other (Describe) _____

Describe any special training, skills, qualifications or other experience that relate to the position(s) applied for: _____

Salary Desired: _____ Date Available to Start: _____

Preferred Geographic Location(s): _____

Is there any reason you are unable to perform all of the tasks of the job you are applying to?
Yes No

EMPLOYMENT EXPERIENCE

List Current or Most Recent Job First. "See Resume" will not be accepted.

1. Company Name: _____

Dates of Employment (mm/yy) From: _____ To: _____

Company Address: _____

Job Title: _____ Supervisor's Name: _____

Brief Description of Job Duties: _____

Reason for Leaving: _____

Starting wage: \$ _____ per _____ Ending wage: \$ _____ per _____

May we contact this employer? Yes No

2. Company Name: _____

Dates of Employment (mm/yy) From: _____ To: _____

Company Address: _____

Job Title: _____ Supervisor's Name: _____

Brief Description of Job Duties: _____

Reason for Leaving: _____

Starting wage: \$ _____ per _____ Ending wage: \$ _____ per _____

May we contact this employer? Yes No

3. Company Name: _____

Dates of Employment (mm/yy) From: _____ To: _____

Company Address: _____

Job Title: _____ Supervisor's Name: _____

Brief Description of Job Duties: _____

Reason for Leaving: _____

Starting wage: \$ _____ per _____ Ending wage: \$ _____ per _____

May we contact this employer? Yes No

EDUCATION

School Name: _____ City: _____

Diploma/Degree: _____ Course of Study: _____

Any other training, apprenticeships, skills, licenses, certifications or registrations that you feel are pertinent to your application?

MILITARY SERVICE RECORD

Have you had any experience in the U.S. Armed Forces or State National Guard?

Yes No

If yes, what branch? _____

Date entered: _____

Rank at Discharge: _____ Date of Discharge: _____

Describe duties and any special training: _____

REFERENCES (Do not include relatives, former employers or individuals you have known less than one year.)

1. Name: _____ Relationship: _____

Phone Number: _____ Years Acquainted: _____

2. Name: _____ Relationship: _____

Phone Number: _____ Years Acquainted: _____

3. Name: _____ Relationship: _____

Phone Number: _____ Years Acquainted: _____

AUTHORIZATION AND UNDERSTANDING

I understand that, prior to being offered employment, I may be requested to take an employment examination. In the event I have a disability that will affect my ability to take the test, I will inform the Firm prior to the administration of the test so that a reasonable accommodation can be made. The Firm reserves the right to require documentation regarding the need for accommodation. I represent to Fortis Energy Services, Inc., known as the "Company", that all of the information now or hereafter given by me in support of my application is true and complete to my knowledge and understand that if employed, falsified or omitted information on this Application may result in termination of the hiring process or employment relationship. I hereby authorize investigation of all statements contained in this application for any employment-related purpose. I release the listed references and all employers, except those specifically excepted, * to provide you with any and all applicable information they may have. I hereby release these references and former employers from all liability for any information they may give you, and I waive any requirement that the reference and former employer provide me with written or verbal notice of their response to your inquiry. I hereby consent for Fortis, through an authorized testing source of its choice, to collect blood, urine, or saliva samples from me and to conduct any other necessary medical tests to determine the presence of alcohol, drugs or controlled substances, and I hereby release Fortis from any liability arising out of such tests or results. Further, I give my consent for the release of the test results and other relevant medical information to authorized Fortis management for appropriate review. **I agree that if hired, my employment status is at will, and that either party may terminate the employment relationship, with or without cause at any time, and I further agree that this arrangement may only be altered in writing directed to me personally and signed by the President of Fortis Energy Services, Inc. I agree that any action or suit against Fortis Energy Services, Inc. as a result of my employment or termination of employment, must be brought within 182 days of the event giving rise to the claims, complaint, action or suit, or no later than the applicable limitations period established by statute, whichever is less**

Signature

Date

For Employer Use Only

Interviewed by: _____

Date: _____

Hired: Yes _____ No _____

Starting Date: _____

Position: _____

Wage: _____