ROMIDA
INCORPORATED

HUGH WATER SERVICES DIVISION | **HUGH BOTTLED WATER DIVISION** | **HOLT DRILLING DIVISION**

Application for Employment

Personal Information **Date**_____

NAME (LAST NAME FIRST)_____

PRESENT ADDRESS_____ CITY_____ STATE_____ ZIP CODE_____

PHONE NO_____ SECONDARY PHONE NO_____ REFERRED BY_____

Employment Desired

POSITION_____ DATE YOU CAN START_____

ARE YOU EMPLOYED NOW? ☐ YES ☐ NO

IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? ☐ YES ☐ NO

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? ☐ YES ☐ NO

Education History

NAME AND LOCATION OF HIGH SCHOOL_____

YEARS ATTENDED_____ DID YOU GRADUATE?_____

NAME OF COLLEGE_____ YEARS ATTENDED_____

SUBJECTS STUDIED_____

NAME OF TRADE OR BUSINESS SCHOOL_____ YEARS ATTENDED_____

SUBJECTS STUDIED_____

General Information

SUBJECT OF SPECIAL STUDY/ RESEARCH WORK_____

SPECIAL TRAINING_____

SPECIAL SKILLS_____

U.S. MILITARY OR NAVAL SERVICE_____ RANK_____

PO BOX 53 • Brockway PA 15824 • 814-265-8981 • TOLL FREE 877-987-8981 • Fax 814-265-0000

ROMIDA
INCORPORATED

HUGH WATER SERVICES DIVISION | **HUGH BOTTLED WATER DIVISION** | **HOLT DRILLING DIVISION**

Former Employers (LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST)

1. NAME & ADDRESS OF EMPLOYER _____

   POSITION _____ DATE WORKED _____

   REASON FOR LEAVING _____

2. NAME & ADDRESS OF EMPLOYER _____

   POSITION _____ DATE WORKED _____

   REASON FOR LEAVING _____

3. NAME & ADDRESS OF EMPLOYER _____

   POSITION _____ DATE WORKED _____

   REASON FOR LEAVING _____

References (LIST THREE PEOPLE WHO ARE NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 1 YEAR)

1. NAME _____ CITY _____

   CONTACT NUMBER _____ YEARS KNOWN _____

2. NAME _____ CITY _____

   CONTACT NUMBER _____ YEARS KNOWN _____

3. NAME _____ CITY _____

   CONTACT NUMBER _____ YEARS KNOWN _____

PO BOX 53 • Brockway PA 15824 • 814-265-8981 • TOLL FREE 877-987-8981 • Fax 814-265-0000

ROMIDA
INCORPORATED

HUGH WATER SERVICES DIVISION | **HUGH BOTTLED WATER DIVISION** | **HOLT DRILLING DIVISION**

Authorization

"I certified that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed within to give you any and all information concerning my previous employment and any pertinent information that they may have, personal, or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability - related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with the written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

DATE_____ SIGNATURE_____

APPLICANT MUST SUPPLY COPY OF VALID DRIVERS LICENSE TO ATTACH

DO NOT WRITE BELOW THIS LINE

INTERVIEWER'S REMARKS

_____

_____

_____

_____

_____

PO BOX 53 • Brockway PA 15824 • 814-265-8981 • TOLL FREE 877-987-8981 • Fax 814-265-0000