Applicant Information

Date:		Date Available:	
First Name:		Are you a citizen of	O Yes
Middle Initial:		the United States?:	○ No
Last Name:		If no to above, are	O Yes
Social Security No.:		you authorized to work in the U.S.?:	O No
Street:			◎ N/A
City:		MSHA New Miner Underground Safety	O Yes
State:		Training:	O No
Zip Code:		If yes to above, attach	MSHA certificate
Phone:		Other MSHA:	O Yes
Email Address:			O No
		If yes to above, attach	other MSHA certificate
Position(s) Applied for:		Have you ever been	
Desired Pay:	\$	convicted of a felony?:	
		If yes to above, explain:	
Education			
High School:		Other:	
High School:		Other: Address:	
Address:		Address:	
Address: From: To:		Address: From:	✓ Yes
Address: From:	Yes	Address: From: To:	✓ Yes✓ No
Address: From: To: Did you graduate?:	○ Yes ○ No	Address: From: To:	
Address: From: To:		Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?:		Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree:		Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree: College:		Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree: College: Address:		Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree: College: Address: From: To:	No No	Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree: College: Address: From:	No No Yes	Address: From: To: Did you graduate?:	
Address: From: To: Did you graduate?: Degree: College: Address: From: To:	No No	Address: From: To: Did you graduate?:	

rease hist two profess	sional references.		
First Reference - Full		Second Reference -	
Name:		Full Name:	
Relationship:		Relationship:	
Company:		Company:	
Phone:		Phone:	
Address:		Address:	
Additional Reference	es		
Please list two referer	nces other than relatives and/or p	previous employers.	
First Reference - Full Name:		Second Reference - Full Name:	
Relationship:		Relationship:	
Phone:		Phone:	
Address:		Address:	
Employment History Most Recent Company: Phone:		Second Most Recent Company: Phone:	
Address:		Address:	
Supervisor:		Supervisor:	
Job Title:		Job Title:	
Starting Pay:	\$	Starting Pay:	\$
Ending Pay:	\$	Ending Pay:	\$
Responsibilities:		Responsibilities:	T
Skills and Certifications:		Skills and Certifications:	
From:		From:	
То:		То:	
Reason for Leaving:		Reason for Leaving:	
May we contact this		May we contact this	_
riar we contact tills	Yes	Hay we contact tills	O Yes
employer?:	O No	employer?:	O No

If this application lea	ads to employment, I understa iew may result in my release.	ind trial raise Of	nnere aan ig nn en	nadon in my	
I certify that my ans	wers are true and complete to			nation in my	
If other than Honorable, explain:					
Type of Discharge:					
Rank at Discharge:					
Го:					
From:					
Branch:					
Military Service					
Please describe your manual labor experiences:					
Manual Labor Expe	iences				
employer?:	O Yes No				
Reason for Leaving: May we contact this					
Го:					
From:					
Skills and Certifications:					
Responsibilities:					
Ending Pay:	\$				
Starting Pay:	\$				
Supervisor: Job Title:					
Address:					
Phone:					
Company:					

_ Print Name