

COALFIELD SERVICES, INC.

Attn: Margaret Gibson

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PROSPECTIVE EMPLOYEES OF COALFIELD SERVICES, INC.

To be considered for employment with Coalfield Services, Inc., you will be required to consent to and pass a physical examination including drug/alcohol tests and a baseline audiogram.

COALFIELD SERVICES, INC.

APPLICATION FOR EMPLOYMENT

Pre-Employment Questionnaire -- An Equal Opportunity Employer

Date: _____

PERSONAL INFORMATION

Name: _____ SS Number: _____
Last First Middle

Mailing Address: _____
Street City State Zip

Street Address: _____
Street City State Zip

Phone No: (____) _____ Cell Phone No: (____) _____

Are you 18 years or Older? Yes No

Are you either a U.S. Citizen or an Alien Authorized to Work in the United States? Yes No

EMPLOYMENT DESIRED

Position: _____ Date you can start: _____ Salary Desired: _____

Are you Employed Now? Yes No If so, may we contact your employer? Yes No

Ever applied to this company before? Yes No If so, where? _____ When? _____

Do you have friends or relatives employed by this Company? No Yes Names: _____

Referred by: _____ Are you willing to travel? Yes No

Do you have a valid driver's license? Yes No Do you have a CDL License? Yes No
Required for employment

Do you have reliable transportation? Yes No Will you work overtime as needed? Yes No

EDUCATION	Name and Address of School	* No of Yrs Attended	* Did you Graduate?	Course of Study
High School				
College				
Other (Specify)				

GENERAL

Identify any special training you have received: _____

Special Skills _____

Activities:(Civic, Athletic, Etc.) _____
Exclude Organizations, the name of which indicates the race, creed, sex, age, martial status, color or nation of origin of its members

U.S. Military or Naval Service _____ Rank _____ Present Membership in National Guard or Reserves _____

* The Age Discrimination in Employment Act of 1987 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age

Employment History

List below your present and past employers starting with your most recent employer. Account for all periods of employment. You must complete this section even if attaching a resume.

FORMER EMPLOYERS

Date: Mo. & Yr.		EMPLOYER Name, Address & Phone Number	Salary	Job Position	Reason for Leaving
From	To				

Which job did you like best and why? _____

If hired, what value would you add to our company?: _____

REFERENCES: Give the names of three persons not related to you, who have knowledge of your work performance.

Name & Company	Address	Phone	Type Business	Relationship & Yrs Acquainted

***** Please read each statement closely and initial each acknowledging your understanding.*****

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

Coalfield Services, Inc. is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. Coalfield Services desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. Coalfield Services will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

DISCRIMINATION AND SEXUAL HARASSMENT POLICY STATEMENT

Coalfield Services will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

DISCLOSURE TO APPLICANTS CONCERNING DRUG/ALCOHOL TESTING

_____ If you are offered a position with Coalfield Services, you will be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

COMPLETE AND ACCURATE INFORMATION

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

AT-WILL EMPLOYMENT

_____ I understand and agree that if I am employed, my employment will be "at will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president.

TESTING AUTHORIZATION

_____ If offered a position with Coalfield Services, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

INVESTIGATION AUTHORIZATION

_____ I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

COMPANY OBLIGATION

_____ I understand and agree that Coalfield's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM, IF EMPLOYED BY THE COMPANY.

" I certify 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 listed above to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damage that may result from furnishing same to you. I understand and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without prior notice and without cause."

_____ Signature _____ Date _____

Do not Write Below This Line -- Office Use Only

Interviewed by: _____ Date: _____

Remarks: _____

Skills: _____ Hired: Yes No

Position _____ Dept: _____ Rate: _____
Base/Shop Local Away UMWA

Authorization for MSHA training:

KY Sur. KY UG VA Sur VA UG KY Sur KY UG

Other Training: _____