



## APPLICATION FOR EMPLOYMENT

### PERSONAL INFORMATION

DATE \_\_\_\_\_

NAME \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_  
LAST FIRST MIDDLE

ADDRESS \_\_\_\_\_ STREET \_\_\_\_\_  
CITY STATE ZIP PHONE NUMBER \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES  NO  IF NO, HOW OLD ARE YOU? \_\_\_\_\_ & YOUR BIRTHDATE \_\_\_\_\_

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES  NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES  NO  IF YES, PLEASE EXPLAIN ALL OFFENSES AND FINAL DISPOSITIONS:  
 \_\_\_\_\_  
 \_\_\_\_\_

### EMPLOYMENT DESIRED

REFERRED BY

POSITION \_\_\_\_\_ DATE YOU CAN START? \_\_\_\_\_

SERVICE ADVISOR  
 PRODUCTION  
 LUBE TECHNICIAN  
 CASHIER  
 DETAILER  
 TEAM LEADER  
 ASST. MANAGER

ARE YOU PRESENTLY EMPLOYED? \_\_\_\_\_

HAVE YOU EVER APPLIED HERE BEFORE? \_\_\_\_\_ WHEN? \_\_\_\_\_

SALARY DESIRED \_\_\_\_\_

ARE YOU INTERESTED IN (CHECK ALL THAT APPLY):

PART-TIME: # OF HOURS/WEEK \_\_\_\_\_  FULL-TIME  TEMPORARY  SEASONAL

DAYS AND HOURS AVAILABLE	DAY	SUN	MON	TUES	WED	THURS	FRI	SAT
	FROM							
TO								

SPECIAL SKILLS OR PREVIOUS EXPERIENCES THAT YOU ENJOY THAT WOULD BE PERTINENT TO YOUR HIRING: \_\_\_\_\_  
 \_\_\_\_\_

### DRIVING SKILLS

DO YOU HAVE A VALID DRIVER'S LICENSE? YES  NO  IF YES, LICENSE NUMBER \_\_\_\_\_

CAN YOU DRIVE: MANUAL TRANSMISSION? YES  NO  AUTOMATIC TRANSMISSION? YES  NO

IN THE PAST THREE (3) YEARS, DO YOU HAVE ANY ACCIDENTS OR TRAFFIC VIOLATIONS? YES  NO

IF YES EXPLAIN \_\_\_\_\_  
 \_\_\_\_\_

<b>EDUCATION</b>	<b>NAME AND LOCATION OF SCHOOL</b>	<b>NO OF YEARS ATTENDED</b>	<b>DID YOU GRADUATE?</b>	<b>SUBJECTS STUDIED</b>
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

<b>FORMER EMPLOYERS</b> <small>Start with last one first</small>	<b>NAME, ADDRESS AND TELEPHONE NUMBER OF EMPLOYER</b>	<b>SALARY</b>	<b>POSITION</b>	<b>REASON FOR LEAVING</b>
			<b>SUPERVISOR</b>	
FROM		STARTING	POSITION	
TO		FINAL	SUPERVISOR	
FROM		STARTING	POSITION	
TO		FINAL	SUPERVISOR	
FROM		STARTING	POSITION	
TO		FINAL	SUPERVISOR	

WHICH OF THESE JOBS DID YOU LIKE BEST? \_\_\_\_\_

WHAT DID YOU LIKE MOST ABOUT THIS JOB? \_\_\_\_\_

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND, IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. I AUTHORIZE THE COMPANY TO CONTACT MY FORMER EMPLOYERS FOR REFERENCE PURPOSES.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS AS SET FORTH IN THE COMPANY'S EMPLOYEE HANDBOOK, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN ITS PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE!**

INTERVIEWED BY \_\_\_\_\_ DATE \_\_\_\_\_

REMARKS \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

NEATNESS \_\_\_\_\_

HIRED YES  NO  POSITION \_\_\_\_\_ DEPARTMENT \_\_\_\_\_

SALARY/WAGE \_\_\_\_\_ STARTING DATE \_\_\_\_\_

APPROVED: 1. \_\_\_\_\_ ASSISTANT SITE MANAGER 2. \_\_\_\_\_ SITE MANAGER 3. \_\_\_\_\_ GENERAL MANAGER