

APPLICATION FOR EMPLOYMENT

Date: _____

Name _____ S.S.# _____
last first middle

Present address _____
street city state zip

Telephone _____
#1 #2 #3

Previous address _____
street city state zip

Position applying for _____ Prefer how many hours per week _____

Have you worked for us before? _____ Rate of pay expected per hour _____

* Are you over 21? _____ (if no, applicant is subject to minimum legal age verification)

* Can you perform this job without a reasonable accommodation? _____ If no, please indicate any accommodations needed

* Have you been convicted of a crime in the past ten years? _____ If yes, list conviction(s):

* Are you currently on parole OR probation? _____ If so, for how long? _____

* Are you a U.S. Citizen? _____

If yes, can you provide documentation upon employment? _____

If no, are you a lawfully immigrated alien who is legally able to work? _____

* In the event of injury, we will provide a medical facility. Do you have a physician of your choice?

_____ name address city state zip

Education: _____ Name and Location of School _____ Years Completed _____ Graduate? _____

High School _____

College _____

Other _____

Employment Record (dates must be accurate):

From _____ to _____
name of employer name of supervisor

address telephone number

starting salary ending salary position and duties

reason for quitting or termination

How much personal leave did you require? _____ Are you eligible for rehire? _____

From _____ to _____
name of employer name of supervisor

address telephone number

starting salary ending salary position and duties

reason for quitting or termination

How much personal leave did you require? _____ Are you eligible for rehire? _____

From _____ to _____
name of employer name of supervisor

address telephone number

starting salary ending salary position and duties

reason for quitting or termination

How much personal leave did you require? _____ Are you eligible for rehire? _____

I certify, with my signature, that the above information is correct and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future and that employment is strictly on an at-will basis.

signature

date

Please complete the following in order to authorize the Lubbock County Sheriff's Department to provide Bolton Oil Company with any criminal information regarding the person signed below.

signature

print name

social security #

birthdate

driver's license # and state