



# Application for Employment

*Applicants will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.*

Date: \_\_\_\_/\_\_\_\_/20\_\_

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Last Name	First Name	MI	Home Telephone
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Street Address	City	State	Zip	Home Telephone
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Have you ever applied for employment with Stern Oil Company? \_\_\_\_\_  
 Yes No When? \_\_\_\_\_ Social Security Number \_\_\_\_\_

Position Desired \_\_\_\_\_ Expected Wages \$ \_\_\_\_\_/hr

Apart from absence for religious observances, are you available to work full-time?  
 Yes No If no, what hours can you work? \_\_\_\_\_

Will you work overtime if asked? Yes No

When will you be available to start work: \_\_\_\_/\_\_\_\_/20\_\_

Are you legally eligible for employment in the United States? Yes No

Other special training or skills (languages, machine operations, etc.) \_\_\_\_\_

## EDUCATION

School	Name and Location of School	Course of Study	No. Years Completed	Did you graduate?	Degree or Diploma
Graduate					
College					
Business/Trade/Technical					
High School					
Elementary					

## Membership in Professional or Civic Organizations

(Exclude those that may disclose your race, color, religion or national origin)

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**Traffic convictions and forfeitures for the past three (3) years (other than parking violations)**

(Use back if more space is needed)

Location	Date	Charge	Penalty

1. Have you ever been denied a license, permit or privilege to operate a motor vehicle?    Yes    No

2. Has any license, permit or privilege ever been suspended or revoked?    Yes    No

If the answer to either 1 or 2 is yes, attach statement giving details

<b>EMPLOYMENT</b>	<b>NOTE:</b> DOT requires that employment for at least three (3) years and/or commercial driving experience for the past ten (10) years be shown.
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1. Company Name	Telephone
Address	(      )
	Employed (state, month and year)
	From                      To
Name of Supervisor	Starting Salary:                      Ending salary:
	/hr     /hr
Job Title and Description	Reason for Leaving

2. Company Name	Telephone
Address	(      )
	Employed (state, month and year)
	From                      To
Name of Supervisor	Starting Salary:                      Ending salary:
	/hr     /hr
Job Title and Description	Reason for Leaving

3. Company Name	Telephone
Address	(      )
	Employed (state, month and year)
	From                      To
Name of Supervisor	Starting Salary:                      Ending salary:
	/hr     /hr
Job Title and Description	Reason for Leaving

4. Company Name	Telephone
Address	(      )
	Employed (state, month and year)
	From                      To
Name of Supervisor	Starting Salary:                      Ending salary:
	/hr     /hr
Job Title and Description	Reason for Leaving

<b>MILITARY</b>	Did you serve in the U.S. Armed Forces:    Yes    No	If yes, what branch:
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1. Describe any training received relevant to the position for which you are applying:

# AUTHORIZATIONS

## DRIVING RECORD

*I consent to the release of my Motor Vehicle Record to Stern Oil Company. I understand the company will use these records to evaluate my suitability to drive a, non-commercial, company vehicle should the position I am applying for require it. This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq.. "Federal Drivers Privacy Protection Act", and is intended to constitute "written consent" as required by this Act.*

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

## PREVIOUS EMPLOYMENT

*I hereby authorize previous employers to give Stern Oil Company, Inc. all information regarding my services, character, and conduct while employed with their firms. Such firms are released from any and all liability, which may result from furnishing such information to Stern Oil Company, Inc.*

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date

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*The information provided in this Application for Employment is true, 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.*

*If you decide to engage an investigative consumer-reporting agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.*

\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Date