



EMPLOYMENT APPLICATION

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, or any other legally protected status.

PLEASE PRINT

Position(s) applied for:		Date of application:
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How did you learn about the company? (Circle one)		
Advertisement	Current Employer	Friend
Recruiting Firm	Other (please describe)	

Last Name	First Name	Middle Name
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Street Address	
City/State	Zip
Home Phone	Work Phone
Cell Phone	
Email	

Can you perform the essential functions of the position for which you are applying?	YES	NO
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If no, please explain. (If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer before filling out this section of the form.)

Are you legally eligible to be employed in the United States? <i>(Proof of identity and eligibility will be required upon employment.)</i>	YES	NO
Are you over the age of 18? (If no, you may be required to provide authorization to work.)	YES	NO

Taylor Oil Co. is an Employment At-Will Employer. Employment is terminable at will so that both the company and its employees remain free to choose to end their work relationship at any time.

Have you ever worked for this Company before?	Job Title:	YES	NO
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If yes, where? When? (Give dates.)

List any job-related skills or accomplishments including military service.

Can you speak, read, or write in a language other than English?	YES	NO
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If yes, which language(s)?

Are you available to work:	DAYS	NIGHTS	WEEKENDS	FULL TIME
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If you cannot work full time, please explain:

Days and Hours Available (If employed, I will notify my supervisor in writing should my availability change.)					
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
From – To	From – To	From – To	From – To	From – To	From – To

Are you presently employed?	YES	NO
If yes, may we contact your employer?	YES	NO

If presently employed, why are you considering leaving?

EDUCATION

Name and Location of School	Diploma or Degree Received	Course of Study	Dates Attended
HIGH SCHOOL			
COLLEGE			
GRADUATE SCHOOL			
VOCATIONAL OR TRADE SCHOOL			

EMPLOYMENT

Start with your present or most recent position.

Name of Employer		Phone Number	
Full Address (Including Street, City, State, Zip)			
Supervisor's Name		Title	
DATES EMPLOYED		Rate of Pay Beginning	Final
From Month/Day/Year	To Month/Day/Year		
May we contact this employer? YES NO			

Describe the Work Performed:

Name of Employer		Phone Number	
Full Address (Including Street, City, State, Zip)			
Supervisor's Name		Title	
DATES EMPLOYED		Rate of Pay Beginning	Final
From Month/Day/Year	To Month/Day/Year		
May we contact this employer? YES NO			

Describe the Work Performed:

Name of Employer		Phone Number	
Full Address (Including Street, City, State, Zip)			
Supervisor's Name		Title	
DATES EMPLOYED		Rate of Pay Beginning	Final
From Month/Day/Year	To Month/Day/Year		
May we contact this employer? YES NO			

Describe the Work Performed:

EMPLOYMENT REFERENCE

(Please only provide reference of person to whom you have directly reported.)

Name		Phone Number	
Street Address		Occupation	
City/State	Zip		
May we contact this reference? YES NO			

Name		Phone Number	
Street Address		Occupation	
City/State	Zip		
May we contact this reference? YES NO			

Name		Phone Number	
Street Address		Occupation	
City/State	Zip		
May we contact this reference? YES NO			

APPLICANTS WILL RECEIVE CONSIDERATION FOR POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, AGE, SEX (EXCEPT WHERE SEX IS A BONAFIDE OCCUPATIONAL QUALIFICATION), SEXUAL ORIENTATION, MARITAL STATUS, VETERAN STATUS, DISABILITY, OR GENETIC INFORMATION.

CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM:

I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background and credit history check. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I understand and acknowledge that unless otherwise defined by applicable law or written agreement with Taylor Oil Co., any employment relationship with the Taylor Oil Co. will be "employment at will." This means that I may resign at any time and you, the Employer, may discharge me at any time, with or without cause, and with or without advance notice.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signed: _____ Date: _____