



Education	Name and Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
College/ University				
College/ University				
Other (Specify)				

**Employment History:**

List below all present and past employment starting with your most recent employer (last 7 years is sufficient). Please write on back if this page does not give you enough space. You may also include any job-related military service assignments and volunteer activities. Account for all periods of unemployment within the Employment History areas.

- 1. Employer Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address & Street:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Dates Employed:** From \_\_\_\_\_ To \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Job Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**May we contact this employer for a reference?**     **Yes**     **No**
- 2. Employer Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address & Street:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Dates Employed:** From \_\_\_\_\_ To \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Job Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**May we contact this employer for a reference?**     **Yes**     **No**
- 3. Employer Name:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Type of Business:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Address & Street:** \_\_\_\_\_ **City, State, Zip:** \_\_\_\_\_

**Dates Employed:** From \_\_\_\_\_ To \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Job Duties:** \_\_\_\_\_

**Reason for leaving:** \_\_\_\_\_

**May we contact this employer for a reference?**     **Yes**     **No**

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?        Yes        No

If no, please describe the functions that cannot be performed: \_\_\_\_\_

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Why do you want to work for Gil Moore Oil Company?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe any specialized training, skills and extracurricular activities that would pertain to the position you are applying for:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References:**

List below three persons, not related to you, who have knowledge of your **work performance** within the last three years:

Name	Phone #	Best Time To Call	Relationship
1. _____	(____) _____	_____ am/pm	_____
2. _____	(____) _____	_____ am/pm	_____
3. _____	(____) _____	_____ am/pm	_____

**Employee Availability:**

List time AVAILABLE to work. Please specify hours:

**Monday** \_\_\_\_\_

**Tuesday** \_\_\_\_\_

**Wednesday** \_\_\_\_\_

**Thursday** \_\_\_\_\_

**Friday** \_\_\_\_\_

Saturday \_\_\_\_\_

Sunday \_\_\_\_\_

**Applicant's Statement:**

**Please Read Carefully. Initial Each Paragraph and Sign Below:**

\_\_\_\_\_  
**Initial** 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, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any 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.

\_\_\_\_\_  
**Initial** I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the reference I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of disclosure. In addition, I hereby release Gil Moore Oil Company and it's affiliates, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_  
**Initial** I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Gil Moore Oil's designated representative.

\_\_\_\_\_  
**Initial** Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien, or outstanding judgment) be conducted by internal personnel employed by Gil Moore Oil Company, I am entitled to copies of any such public records obtained by Gil Moore Oil Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

- I waive receipt of a copy of any public record described in the paragraph above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

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