



An Equal Opportunity Employer
(Please Print)

Date of Application(s) _____ Position (s) Applied For _____

Name _____ Telephone _____
Last First Middle Area Code

Address _____
Number Street City State Zip Code

If employed and under 18 years of age, can you furnish a work permit? Yes _____ No _____

Have you filed an application with this company before? Yes _____ No _____
If yes, give date: _____

Have you ever been employed with this company before? Yes _____ No _____
If yes, give date: _____

Are you currently employed? Yes _____ No _____
If yes, may we contact your present employer? Yes _____ No _____

Are you prevented from lawfully becoming employed
in this country because of visa or immigration status? Yes _____ No _____
(Proof of citizenship or immigration status will be required upon employment)

On what date would you be available for work? _____

When are you able to work? _____ Full Time _____ Part Time _____ Shift Work _____ Temporary

Have you ever been convicted of a felony within the last 7 years? Yes _____ No _____
(Conviction will not necessarily disqualify applicant from employment)

If yes, please explain: _____

(*Illinois applicants: Under Illinois law applicants are obliged to disclose sealed or expunged records of conviction or arrest)

APPLICATION FOR EMPLOYMENT

	Elementary	High	College/ University	Graduate/ Professional
School Name				
Years Completed/ Degree	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe Specialized Training, Apprenticeship, Skills and Extra- Curricular Activities				

Honors Received _____

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

APPLICATION FOR EMPLOYMENT

List professional, trade, business or civic activities and offices held. (You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status.)

Give name, address and telephone numbers of three references who are not related to you and are not previous employers.

1. Name: _____ Telephone: _____
 Address: _____

2. Name: _____ Telephone: _____
 Address: _____

3. Name: _____ Telephone: _____
 Address: _____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. (You may exclude organization names that would reveal sex, race, religion, national origin, age, ancestry, disability or other protected status)

1	Employer:	Dates Employed	
	Address:	From:	To:
	Phone Number:		
	Job Title:	Supervisor:	
	Work Performed:		
	Reason for Leaving:		

2	Employer:	Dates Employed	
	Address:	From:	To:
	Phone Number:		
	Job Title:	Supervisor:	
	Work Performed:		
	Reason for Leaving:		

3	Employer:	Dates Employed	
	Address:	From:	To:
	Phone Number:		
	Job Title:	Supervisor:	
	Work Performed:		
	Reason for Leaving:		

4	Employer:	Dates Employed	
	Address:	From:	To:
	Phone Number:		
	Job Title:	Supervisor:	
	Work Performed:		
	Reason for Leaving:		

If you need additional space, please continue on a separate sheet of paper.

APPLICATION FOR EMPLOYMENT

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment experience or education.

NOTES:

#	Question	YES	No	I DON'T KNOW
1	Have you been or are you a member of any union?			
2	Are you available to work up to 12 hours per shift?			
3	Are you available to work up to 7 days a week?			
4	Can you walk up to 1 mile continuously?			
5	Are you able to be attentive to an ongoing activity for long periods of time?			
6	Do you have prior work experience in the refinery?			
7	Are you able to communicate (for example: verbally, visually, or in another effective manner) with co-workers and other individuals?			
8	Are you able to lift up to 50 lbs?			
9	Are you able to climb at least 1 or more steps on a regular basis?			
10	Are you able to perform repetitive tasks from 1-12 hours per day?			
11	Are you able to push/pull at least 20 lbs?			
12	Are you able to bend/sit 1-12 hours per shift?			
13	Are you able to twist 1-12 hours per shift?			
14	Are you able to kneel 1-12 hours per shift?			
15	Are you able to crouch 1-12 hours per shift?			
16	Are you able to stand 1-12 hours per shift?			
17	Are you able to walk 1-12 hours per shift?			
18	Are you able to wear safety equipment (such as: thin coveralls, safety toed shoes, (supplied by you), hard hat, safety glasses, goggles, hearing protection)?			
19	Are you sensitive to hot or cold temperatures?			
20	Are you able to climb a ladder up 12' high?			
21	Are you able to work in brightly-lit environments?			
22	Are you able to work in dimly-lit environments?			

APPLICATION FOR EMPLOYMENT

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date