

Employment Application

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied For	Date of Application
How did you learn about us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
	<input type="checkbox"/> Inquiry
	<input type="checkbox"/> Other _____

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: () _____ E-mail Address: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If so, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

College: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____
 From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: () _____

Address: _____

Previous Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

NOTIFICATION AND AUTHORIZATION FOR BACKGROUND CHECK

I hereby authorize Foley Services and/or their agents to investigate my background for employment purposes. I acknowledge that under the Fair Credit Reporting Act, as amended by the Fair And Accurate Credit Transactions Act of 2003, I have been informed that this background check will consist of investigative consumer reports which may include information about my character, criminal record, work habits, credit background, academic-credential verification, job experience, and reasons for termination. Also, it may include information about my workers' compensation claim history, driving record or abstract, personal characteristics, general reputation and mode of living. I acknowledge that these reports may be obtained at any time after receipt of my authorization, and if I am hired, throughout my employment.

I am aware that in the event an investigative consumer report is prepared, I am entitled to request additional disclosures regarding the nature and scope of the investigation being requested as well as a written summary of my rights under the Fair Credit Reporting Act.

I authorize and release from all liability, without reservation, the consumer reporting agency, (CRA) and any law enforcement agency, administrator, state/federal agency, institution, information service bureau, employer, employee, insurance company or person gathering or providing information, to complete this investigation.

Prior to an adverse employment decision being made, due totally or partially to information obtained from a consumer report, G.H. Berlin Lubricants will provide me with a copy of the report, a summary of my rights under the Fair Credit Reporting Act as amended by the Fair And Accurate Credit Transactions Act of 2003, and the source of the report so that I may contact them, if I wish to do so.

My signature below certifies that this authorization and the accompanying application and other documents were completed by myself and are complete and true to the best of my knowledge. This release will remain valid unless revoked in writing.

Copies and facsimile copies of this document may be accepted in lieu of the original.

Applicant Signature

Printed Name

Social Security #

____/____/____
Date of Birth

Drivers License #

State

Current Address

City

State

Zip

If you have used any alias names (including maiden names) within the past seven years, please list them here.