



# Application for Employment

## Applicant Information

Last Name		First Name		Middle	Date
Current address			Apt/Unit#	Phone	
Town	State	Zip	Cell phone		
Prior address			Apt/Unit#	Time there	
Town	State	Zip	Date of Birth		
Email			Social Security #		
Are you a citizen of the U.S.?			If no, are you authorized to work in the U.S.?		
Have you ever worked for this company before?				If so, when?	
Have you ever been convicted of a felony?				if so, please explain	

## Experience

Work Done	Type of Equipment	How Long	Location
Licenses held	Issuing State	Expiration	License Number

Licenses denied, revoked, suspended-please explain:

## Education

High School		Address	
From	To	Did you graduate?	Degree
Trade School		Address	
From	To	Did you graduate?	Degree
College		Address	
From	To	Did you graduate?	Degree
Other		Address	
From	To	Did you graduate?	Degree
Military Service Branch		Rank	
From	To	Type of discharge	

If other than honorable, explain

*(please list all related Training Certificates in Other Training)*

## Previous Employment

1. Company		Address	
From	To	Phone	Supervisor
Position		Reason for leaving	
Responsibilities			
2. Company		Address	
From	To	Phone	Supervisor
Position		Reason for leaving	
Responsibilities			

3. Company		Address	
From	To	Phone	Supervisor
Position		Reason for leaving	

Responsibilities

**References (please list three professional references)**

1. Full Name		Relationship	
Company		Phone	
Address			

2. Full Name		Relationship	
Company		Phone	
Address			

3. Full Name		Relationship	
Company		Phone	
Address			

**Motor Vehicle Record, Driver/Technician Applicants only, last three years**

Date	Accident/Violation	City, State	Offense	Action	Comments

**Accident Record, Driver/Technician Applicants only, last three years**

Date	Nature/Accident	City, State	Fatalities	Injuries	Comments

**Federal Motor Carrier regulation compliance**

Were you subject to FMCSR's while employed by previous employer?	YES		NO	
Was your previous job designated as a safety sensitive function in any DOT regulated mode, subject to alcohol and controlled substances testing requirements as required by 49 CFR part 40?	YES		NO	

**Additional Information and Disclaimer**

Date Available	Position Applied For	Wage desired
Willing to work over-time		Current wage
Willing to attend after hours training school		
What makes you the best choice for this position		

I hereby authorize the company to inquire as to my record of any or all of my former employers and references, with no liability arising therefrom. This certifies that this application was completed by me, and that all entries are true and complete to the best of my knowledge. If this application leads to my employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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All applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, the presence of a non-job related medical condition or handicap, or any other legally protected status. White Mountain Oil and Propane, Inc. is an equal opportunity employer. April 2017