

POWERS OIL COMPANY LTD.
Db a Powers Oil & Propane
EMPLOYMENT APPLICATION

1. Employer Information

Employer: Powers Oil Ltd. Telephone: 330-821-8387
Address: 1681 West Main St. City/State/ZIP: Alliance, Ohio 44601

It is the policy of Powers Oil Ltd. to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

2. Applicant Information

Applicant Name: _____
Address: _____ City/State/ZIP: _____
Years at this address: _____ Daytime phone: _____ Evening phone: _____
Social Security Number: _____ Driver's License (State/Number): _____

3. Emergency Contact

Who should be contacted if you are involved in an emergency?
Contact Name: _____ Relationship to you: _____
Address: _____ City/State/ZIP: _____
Daytime phone: _____ Evening phone: _____

4. Job Position Applied For: _____

5. Salary Desired: \$ _____ per _____

6. Who referred you to our company? _____

7. Have you been a licensed driver at least 5 years? ____ Yes ____ No

8. If applicable, are you available to work overtime? ____ Yes ____ No

9. If you are offered employment, when would you be available to begin work? _____

10. Are you legally eligible for employment in the United States? ____ Yes ____ No

11. Are you able to perform the essential functions of the job for which you are applying with reasonable accommodations, including those that require moderate to heavy lifting? ____ Yes ____ No

12. Have you ever been convicted of any crime, including traffic violations? ____ Yes ____ No

If yes, please describe: _____

13. Have you ever been involved in a traffic accident? ____ Yes ____ No

If yes, please describe: _____

14. Applicant's Skills and Qualifications

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability or Skill	Type	Yrs Experience	Rating
[] Mechanical Experience	_____	_____	1 2 3 4 5

<input type="checkbox"/> Customer service _____	_____	1 2 3 4 5
<input type="checkbox"/> Driving Experience _____	_____	1 2 3 4 5
<input type="checkbox"/> CDL/Hazmat License _____	_____	1 2 3 4 5
<input type="checkbox"/> Other skills/experience _____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

15. Applicant Employment History

List your current or most recent employment first.

Employer Name: _____
 Supervisor Name: _____
 Address: _____ City/State/ZIP: _____
 Job Duties: _____
 Reason for Leaving: _____
 Dates of Employment (Month/Year): _____

Employer Name: _____
 Supervisor Name: _____
 Address: _____ City/State/ZIP: _____
 Job Duties: _____
 Reason for Leaving: _____
 Dates of Employment (Month/Year): _____

Employer Name: _____
 Supervisor Name: _____
 Address: _____ City/State/ZIP: _____
 Job Duties: _____
 Reason for Leaving: _____
 Dates of Employment (Month/Year): _____

16. Applicant's Education and Training

Did you graduate from High School? _____ Yes _____ No
 If not, did you receive a GED? _____ Yes _____ No
 High School/GED Name and Address:

Did you attend a College/University Name and Address:

Did you receive a degree? _____ Yes _____ No
 If yes, what was the degree received: _____

Other Training (graduate, technical, vocational):

Awards, Honors, Special Achievements:

Military Service: _____ Yes _____ No
 Branch: _____
 Specialized Training: _____

17. References

Please provide three references for you.

Name: _____
Address: _____ City/State/ZIP: _____
Telephone: _____ Relationship: _____

Name: _____
Address: _____ City/State/ZIP: _____
Telephone: _____ Relationship: _____

Name: _____
Address: _____ City/State/ZIP: _____
Telephone: _____ Relationship: _____

18. Please provide any other information that you believe should be considered:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Powers Oil Ltd to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Powers Oil Ltd, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

Printed Name

Signature

DATE