

**Fred Garrison Oil Company
Allstar Fuel**

address: 1107 Walter Griffin
Plainview, TX 79072

We are an equal opportunity employer dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion or national origin

APPLICATION FOR EMPLOYMENT

Please print clearly

PERSONAL					Date	
Name					Social Security Number	
First	Middle (Maiden Name, if any)	Last				
Address <i>For the past three years</i>						
Street	City	State	Zip	How long?		
Address <i>For the past three years</i>						
Street	City	State	Zip	How long?		
Address <i>For the past three years</i>						
Street	City	State	Zip	How long?		
List any other names you have worked under:						
Phone Number ()	Salary Expected	Are you at least 18 years old? Yes No				
List any friends or relatives employed by this company:						
EMPLOYMENT DATA						
Are you willing to work overtime?		Yes	No	Weekends?		
If hired, do you have a reliable means of transportation to get to work?		Yes	No	Holidays?		
Are you currently employed?		Yes	No	If hired, what date would you be able to start?		
Are you on layoff and subject to recall?		Yes	No	If yes, explain:		
Have you ever been discharged or asked to resign from any position?		Yes	No			
If yes, please describe:						
Have you been convicted of a felony in the last seven years?		Yes	No			
On Parole?		Yes	No	Deferred Adjudication?		
				Yes No		
If yes, state the nature of the offense and disposition of the case. Include dates and places.						
* NOTE: Felony convictions or the existence of a criminal record do not constitute an automatic bar to employment						
EDUCATION	Name/Location of School	Last Year Completed				Did you Graduate?
High School		1	2	3	4	Yes No
College		1	2	3	4	Yes No
Trade/Business School		1	2	3	4	Yes No
Subjects of Special Study or Research Work:						
If currently in high school, are you enrolled in a recognized co-op program? Yes No						
Degree/Major						
Date Graduated:						
MILITARY SERVICE						
Are you a veteran?		Yes	No	Dates of Service: From:		To:
Special skills or training:						

WORK HISTORY

Please list your last four employers. Begin with the most recent.

(if you have worked more than four jobs in the last five years, attach a separate sheet)

Company	Address	Phone	From: Mo & Yr	To: Mo & Yr
Job Title	Specific Reason for leaving		Supervisor's name	
Describe duties briefly		Starting Salary	Ending Salary	
Company	Address	Phone	From: Mo & Yr	To: Mo & Yr
Job Title	Specific Reason for leaving		Supervisor's name	
Describe duties briefly		Starting Salary	Ending Salary	
Company	Address	Phone	From: Mo & Yr	To: Mo & Yr
Job Title	Specific Reason for leaving		Supervisor's name	
Describe duties briefly		Starting Salary	Ending Salary	

REFERENCES:

Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			

Are you willing to work overtime? Yes No Weekends? Yes No Holidays? Yes No

PERSONAL

Name		Date of Birth	Social Security Number	
First	Middle (Maiden Name, if any)	Last		
DRIVER LICENSES	State	License No.	Type	Expiration Date

PHYSICAL RECORD

Do you have any physical condition which may limit your ability to perform the job applied for? This question is voluntary, and any answers will be keep confidential.

In case of Emergency Notify:	Name	Address	Phone Number
I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated any time without any previous notice			
Date:	Signature:		