

**APPLICATION FOR EMPLOYMENT**  
(Equal Employment Opportunity Company)

**Lanman Oil Company, Inc.**  
**P.O. Box 108, Charleston, IL 61920**

**GENERAL**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Social Security No. \_\_\_\_\_

Date Available for Employment \_\_\_\_\_

Have you ever been employed by this company?       Yes       No

Are you employed now?       Yes       No

May we contact your present employer?       Yes       No

If yes, give name: \_\_\_\_\_

Are you prevented from lawfully becoming employed  
in this country because of Visa or Immigration status?       Yes       No

Type of work desired: \_\_\_\_\_

Do you have a valid driver's license in this state?       Yes       No

License No. \_\_\_\_\_

Can you perform the essential functions of the job(s)  
for which you are applying?       Yes       No

Are you available to work       Full-Time       Part-Time       Over-Time

Have you been convicted of a felony?       Yes       No  
(Please note that "Yes" answer will not bar you from consideration for employment.)

If Yes, please explain: \_\_\_\_\_

This company is an equal opportunity employer. All applicants will be considered without regard to age, color, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of the job.

**EDUCATION**

ELEMENTARY	HIGH	COLLEGE	GRADUATE
Name _____			
Years Completed: 5 6 7 8      9 10 11 12      1 2 3 4      1 2 3 4			
Course of Study _____			

**SPECIAL SKILLS, QUALIFICATIONS, AND CONSIDERATIONS:**

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES:**

List three (3) non-relatives who are familiar with your qualifications and work history ability.

<u>Name</u>	<u>Title/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

**EMPLOYMENT EXPERIENCE:**

Start with your present or last job. List your last four (4) jobs in order. Do not omit any job.

Employer _____	Supervisor's Name _____
Address _____	Your Position _____
Telephone Number _____	Month/year started; month/year ended _____
Your Salary: Starting/Ending _____	Duties _____

What did you like most about your job? \_\_\_\_\_

What did you like least about your job? \_\_\_\_\_

**EMPLOYMENT EXPERIENCE:** (Continued)

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Employer

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Supervisor's Name

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Address

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Your Position

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Telephone Number

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Month/year started; month/year ended

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Your Salary: Starting/Ending

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Duties

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What did you like most about your job?

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What did you like least about your job?

---

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Employer

---

Supervisor's Name

---

Address

---

Your Position

---

Telephone Number

---

Month/year started; month/year ended

---

Your Salary: Starting/Ending

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Duties

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What did you like most about your job?

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What did you like least about your job?

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Employer

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Supervisor's Name

---

Address

---

Your Position

---

Telephone Number

---

Month/year started; month/year ended

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Your Salary: Starting/Ending

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Duties

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What did you like most about your job?

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What did you like least about your job?

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