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FOR OFFICE USE ONLY!

DATE HIRED: _____ POSITION: _____
 WAGE: \$ _____ STATUS: FT _____ PT _____
 NOTES: _____

APPLICATION FOR EMPLOYMENT

(Complete in blue or black ink only-print information, do not type)

Date: _____

Name:

LAST FIRST MIDDLE INITIAL

Home Address:

STREET CITY STATE ZIP

Social Security #:

Phone #:

E-mail Address:

Wage Desired:

Position Desired:

Date Available:

What hours and days are you available to work?

EDUCATION	SCHOOL NAME	CITY/STATE	LIST DEGREES OR CERTIFICATES
High School			
College or Business School			
Vocational or other School			

IF APPLYING FOR DRIVING JOB COMPLETE THE FOLLOWING:

Are you 18 years of age or older? Yes No

Address for the past 3 years:

Street City State & Zip Code How long? _____
 Street City State & Zip Code How long? _____

List All Current Driver's Licenses	State	License No.	Type	Hazmat & Tanker Endorsements?	Expiration Date

A. Have you ever been denied a license, permit, or privilege to operate a motor vehicle? Yes No
 B. Has any license, permit, or privilege ever been suspended or revoked? Yes No

IF ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS.

DRIVING EXPERIENCE:

Class of Equipment	Equipment Type (Van, Tank, Flat, Etc)	Dates		Approx. No. of Miles (Total)
		From	To	
Straight Truck				
Tractor/Semi-Trailer				
Tractor-Two Trailers				
Other				

ACCIDENT RECORD FOR THE PAST THREE YEARS OR MORE (Attach Sheet if more space is needed)

Dates	Nature of Accident (Head-On, Rear End, Upset, Etc.)	Fatalities	Injuries
Last Accident			
Next Previous			
Next Previous			

TRAFFIC CONVICTIONS & FORFEITURES FOR THE PAST 3 YEARS-(other than parking violations) Attach sheet if necessary

Location	Date	Charge	Penalty

PREVIOUS EMPLOYMENT-Give record for the past 10 years -use additional sheet if necessary.

Employer's Name & Address	Positions/Duties	Reason for Leaving	Pay Rate	Hire Date	Leaving Date
Co. Name					
Address					
Phone No.					
Employer's Name & Address	Positions/Duties	Reason for Leaving	Pay Rate	Hire Date	Leaving Date
Co. Name					
Address					
Phone No.					
Employer's Name & Address	Positions/Duties	Reason for Leaving	Pay Rate	Hire Date	Leaving Date
Co. Name					
Address					
Phone No.					
Employer's Name & Address	Positions/Duties	Reason for Leaving	Pay Rate	Hire Date	Leaving Date
Co. Name					
Address					
Phone No.					

Referred by: Newspaper Agency Walk-in Individual; Name

Can you show proof that you have a legal right to work permanently in the U.S.? yes no

Have you ever been convicted of a felony? yes no

If yes, please explain and list date and city & state of conviction:

References (Business Only)

NAME	COMPANY	ADDRESS	TELEPHONE

TO BE READ AND SIGNED BY APPLICANT

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

I do hereby authorize the investigation of any and all statements contained in said application. I understand that any false statements or misrepresentations of facts in this application will constitute sufficient cause for my dismissal. I am willing to take a physical examination to include drug and alcohol testing when requested. If employed, I understand that employment by Benz Oil Co. Inc. is solely on an at will basis and that this cannot be changed except in writing, signed by the President of the Company.

DATE

APPLICANT'S SIGNATURE