Roadway Lube Plus, LLC

Employment Application

Applicant Information									
Full Name:						Date:			
A ddwg g g	Last	t		M.I.					
Address:	Street Address					Apartment/Unit #			
	City				State	ZIP Code			
Phone:				Email					
Social Secu	rity No.:			Desired Sa	alary: <u>\$</u>				
Position Applied for:				Date Available:					
Are you a citizen of the United States?			YES NO If no, are you authorized to work in the U.S.?						
Have you ever worked for this company?			If yes, when?						
Have you ever been convicted of a crime YES NO involving Moral Turpitude?			NO						
If yes, expla	in:								
		Pre۱	/ious	Employment					
Company:					Phor	ne:			
Address:					Supervis	or:			
Job Title:		Starting Salary:				Ending Salary:			
Responsibil	ities:								
From:	To:								
May we contact your previous supervisor for a reference?									
Company:					Phor	ne:			
Address:						or:			
Job Title:		Ending	g Salary: <u>\$</u>						
Responsibil	ities:								
From:	To:			Reason for Leaving:	Reason for Leaving:				
May we con	ntact your previous supervisor fo	or a refer	ence?	YES NO					

	Previous Employi	ment (0	Conti	nued)		
Company:					Phone:	
Address: _					Supervisor:	
Job Title:	Starting Sa		Ending Salary:			
Responsibiliti	ies:					
_	To:					
May we conta	act your previous supervisor for a reference?	YES		NO		
Company:					Phone:	
Address: _				;	Supervisor:	
Job Title:	Starting Sa	alary: <u>\$</u>			Ending Salary:	
Responsibiliti	es:					
From:	To:	Reasor	n for Le	eaving:		
May we conta	act your previous supervisor for a reference?	YES		NO		
Company:					Phone:	
Address:					Supervisor:	
Job Title:	Starting Sa		Ending Salary:			
Responsibiliti	ies:					
From:	To:	Reasor	n for Le	eaving:		
May we conta	act your previous supervisor for a reference?	YES		NO		
	Educ	ation				
High School:	Address:	YES	NO			
From:	To: Did you graduate?			Diploma	i:: <u> </u>	
College:	Address:	YES	NO			
From:	To: Did you graduate?			Degre	ə: <u> </u>	
Other:	Address:	YES	NO			
From:	To: Did you graduate?			Degre	e:	

Military Service						
Branch:	From:	To:				
Rank at Discharge:	Type of Discharge:	Type of Discharge:				
If other than honorable, explain:						
	Deferences					
Please list three professional / personal referen	References nces.					
Full Name:	Relationship:					
Company:	Phone:					
Address:						
Full Name:	Relationship:					
Company:	Phone:					
Address:						
Full Name:	Relationship:					
Company:	Phone:					
Address:						
Disc	claimer and Signature					
I certify that my answers are true and complete	e to the best of my knowledge.					
If this application leads to employment, I under interview may result in my immediate termination	•	ny application or				
Signature:	Date:					