



Wilson's Petroleum Equipment, Inc.

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MEMBER
PEI
PETROLEUM EQUIPMENT INSTITUTE
PCC 045049
PCC 053364
EC 0001343
GCG 038709

Application for Employment

(Applicants who need accommodation for an interview should request this in advance)

PLEASE PRINT

Date: _____

Name _____ SS# _____

Street _____

City _____ State _____ Zip Code _____

Home telephone (____) _____ Business telephone (____) _____

How were you referred to us?

Newspaper ad School On my own Agency Current employee Other

Name of referral source _____

Indicate the position for which you are applying _____

Do you wish to work: Full time Part time Temporarily

If part time, specify hours or days _____

What is your minimum weekly salary requirement? _____

Date available for work _____

Do you have any commitments to another company that might affect your employment with us?

EDUCATIONAL DATA

School	Print name, number and street, city, state, zip code for each school listing	Number of years completed	Degree, Major or type of course
High School			
College			
Graduate school			
Trade, business, night or corresp.			
Other			

MILITARY EXPERIENCE

Were you in the U.S. Armed Forces? ___ Yes ___ No

If yes, what branch? _____

Date of duty: From _____ to _____

Rank at Separation _____

Briefly describe your duties: _____

EMPLOYMENT HISTORY

List present employer or most recent employer first (use additional paper if necessary)

May we contact these employers: ___ Yes ___ No

Company name	Address	Telephone
Employed From To	Supervisor's Name	Your job title
Your Salary Start End	Reason for leaving	Duties

Company name	Address	Telephone
Employed From To	Supervisor's Name	Your job title
Your Salary Start End	Reason for leaving	Duties

Company name	Address	Telephone
Employed From To	Supervisor's Name	Your job title
Your Salary Start End	Reason for leaving	Duties

GENERAL INFORMATION

Are you legally authorized to work in the United States? ___ Yes ___ No

Are you below the age of 18? ___ Yes ___ No

The specific job functions of the position for which you are making application are: _____

(Describe function or attach a job description to the application)

Are you able to perform these tasks with or without accommodation? _____

How would you perform the tasks and with what accommodation (s)? _____

(To be answered if the prior question is answered "yes")

The attendance requirements of the job for which application is made are: _____

Will you be able to meet these requirements? _____

Have you ever been convicted of a criminal offense? _____ Date _____

Place _____ Nature _____

(An affirmative answer will not automatically disqualify you from being considered as a candidate for employment)

Have you previously applied for employment here? _____ Yes _____ No

If yes, when? _____

Have you previously been employed by this company or its subsidiaries? _____ Yes _____ No

If yes, when? _____

References : List three (Not employer or relatives)

Name & Address	Occupation	Phone

Person to be notified in case of an emergency:

Name _____ Phone _____

Address _____

Relationship _____

Please include any other information or comments you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, accomplishments, etc.. (You may exclude all information indicative of age, sex, race, religion, color, national origin or disability)

Date _____

Signature