

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

Petro Employee Leasing, LLC
LardOilCompany

PERSONAL INFORMATION

NAME (LAST NAME FIRST)			SOCIAL SECURITY NO.
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NO. ()	REFERRED BY		

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED? <input type="radio"/> YES <input type="radio"/> NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="radio"/> YES <input type="radio"/> NO	
EVER APPLIED AT LARD OIL COMPANY BEFORE? <input type="radio"/> YES <input type="radio"/> NO	WHERE?	WHEN?

EDUCATION

NAME AND LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE	SUBJECTS STUDIED
GRAMMAR SCHOOL			
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL			

EMPLOYMENT HISTORY

DATE - FROM & TO	EMPLOYER'S NAME & ADDRESS - CITY & STATE	POSITION - SALARY	GIVE SPECIFIC REASON FOR LEAVING
MONTH YEAR	NAME - PRESENT OR LAST EMPLOYER		
FR	ADDRESS & TELEPHONE NUMBER		
TO	NAME OF SUPERVISOR		
	NAME - PRESENT OR LAST EMPLOYER		
FR	ADDRESS & TELEPHONE NUMBER		
TO	NAME OF SUPERVISOR		
	NAME - PRESENT OR LAST EMPLOYER		
FR	ADDRESS & TELEPHONE NUMBER		
TO	NAME OF SUPERVISOR		

PERSONAL REFERENCES: Please list 1- Family Reference and 2- Non-Related Personal References.

Name	Relationship	Years Known
Address		Telephone Number
Name	Relationship	Years Known
Address		Telephone Number
Name	Relationship	Years Known
Address		Telephone Number

As a condition of employment, all new employees are required to authorize Lard Oil Company to conduct a thorough search of all public records to a person's criminal conviction history. If you are unclear as to what might constitute a criminal conviction, please check with the Company representative at this time. A record or conviction of felony and/or misdemeanor will not necessarily disqualify you from employment consideration. Have you ever been convicted of a felony or misdemeanor, other than minor traffic violations?

YES

NO

If yes, conviction type:

Month/Day/Year: ____/____/____

Describe:

Regular attendance is a requirement of this job. Can you perform this job requirement?

YES

NO

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 authorize you to make such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. (Generally, inquiries regarding medical history will be made only if and after a conditional offer of employment has been extended.) I hereby release employers, schools, health care providers and other persons from all liability in responding to inquiries and releasing information in connection with my application.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Lard Oil Company.

Date _____

Applicant's Signature _____

FOR OFFICE USE ONLY

Applicant _____

Rejected _____

Hired _____

Date Employed _____

Point _____

Employed _____

Department _____

Classification _____

(IF REJECTED, SUMMARY REPORT OF REASONS SHOULD BE PLACED IN FILE)

THIS SECTION TO BE FILLED IN BY RESPONSIBLE OFFICER OR COMPANY REPRESENTATIVE

	SUPERIOR	GOOD	FAIR	BELOW AVERAGE	POOR	WRITTEN RECORD ON FILE
1. APPLICATION						
2. INTERVIEW						
3. PAST EMPLOYMENT						
4. WRITTEN EXAM						
5. CRIMINAL CONVICTIONS						

BACKGROUND CHECK CONSENT FORM

DISCLOSURE STATEMENT

In connection with your Application for Employment, **Petro Employee Leasing, LLC** may conduct an investigation into your consumer credit history, character, general reputation, personal characteristics and/or mode of living, including criminal records, by obtaining a consumer report from one or more consumer reporting agencies. The purpose of this notice is to make you aware of this investigation and to explain your rights regarding this investigation, in accordance with the Fair Credit Reporting Act of 1996, 15 U.S.C. 1981-1981u (the "Act").

1. The consumer information obtained will be used only for the permissible purpose of verifying your suitability for employment at **Petro Employee Leasing, LLC** and for any other purpose. It will not be used in violation of any federal, state or local equal employment opportunity law or regulation.
2. You are entitled to learn the nature and substance of the information in your consumer report which is being conducted by the **Sterling Info Systems s, Inc., P.O. Box 35626 Newark, NJ, 07193-5626; (212) 736-5100**, and submitted to **Petro Employee Leasing, LLC**. You may receive a copy for any adverse information found during this investigation by sending a written request to: **Director of Human Resources, Petro Employee Leasing, LLC**. This information will be provided within five (5) business days of receipt of your request.
3. If you are denied employment because of your consumer report, **Petro Employee Leasing, LLC** will provide to you: (a) a copy of consumer report, and (b) written description of your rights under the Act.
4. Please read the following Consent Form carefully. If you consent to this background check, sign where indicated. **Petro Employee Leasing, LLC** will keep on file at all times a copy of this Consent and Disclosure form.

CONSENT TO CONSUMER CREDIT/CRIMINAL BACKGROUND CHECK

I consent to an investigation by and authorize **Petro Employee Leasing, LLC**, or any person or consumer reporting agency it may employ for this purpose, to obtain my consumer report, including my credit history, character, general reputation, personal characteristics and/or mode of living, including criminal records. I release **Petro Employee Leasing, LLC**, its employees and affiliates, and any and all such persons and consumer reporting agencies contacted from any and all liability for any damages flowing from the disclosure of this information and actions taken thereon.

PLEASE PRINT NEATLY IN BLACK INK ONLY.

Full Name: _____ Store Number: _____
(include alias or other maiden names used) *If applicable*

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ DOB: _____ / _____ / _____

Driver's License Number: _____

Location of all areas (counties/parishes or states) resided for last seven (7) years:

Have you ever been convicted of a felony? (Check One.) Yes No

If yes, please explain: _____

Applicant's Signature

Date

FAX TO: 225.664.3217

DATE AND TIME FAXED: _____