



# Sadler Employment Application



This Employment Application is for employment with the Sadler company designated below (the "Company"). The Company is an equal opportunity employer. All qualified applicants will be considered without regard to race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability, veteran status or other protected status. Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough space on this application.

*Please PRINT except for the signature on the back of the application. This application for employment is good for forty-five (45) days. Consideration for employment after forty-five (45) days requires a new application.*

## PERSONAL INFORMATION

Last Name	First	Initial	Social Security #
Other Name(s) Used (if necessary to check work or education records)			Home Telephone # ( )
Address			Email Address:
Check the company with which employment is sought:			Salary Desired
Sadler Bros. Oil Company	<input type="checkbox"/>	Sadler Travel Plaza – Dunn	<input type="checkbox"/>
Sadler Travel Plaza - Emporia	<input type="checkbox"/>	Sadler Travel Plaza – Suffolk	<input type="checkbox"/>
Sadler Travel Plaza – South Hill	<input type="checkbox"/>		
Other: _____			<input type="checkbox"/>
Position Applied For			
If you are not selected for the position for which you are applying, would you be interested in other positions with any of the other Sadler companies listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you seeking: Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> employment?			
When could you start work?			
Are you legally eligible for employment in the United States, and, if hired, can you furnish proof? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Are you over 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever interviewed with or been employed by the Company or its affiliates before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list date(s), job title(s) & location(s)	
Do you have any relatives employed by the Company or its affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, list name(s), job title(s) & location(s)	
Are you now, or do you expect to be engaged in any other business or employment? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain:			
List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships that may reveal information regarding reveal race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status, or other protected status.)			

## EDUCATION

Circle Highest Grade Completed:	High School	9	10	11	12
	College, Trade or Business	1	2	3	4
	Graduate Studies	_____			
School	Address	Major Studies		Degree, Diploma, License or Certificate	
High School					
College/University					
Vocational, Business, Other					
What skills or additional training do you have that are related to the job for which you are applying?					

## EMPLOYMENT HISTORY

List all employments starting with present or most recent employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

Employed From / /	Employer Name	Supervisor Name	Starting Salary
Employed Until / /	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

**REFERENCES**

Please give three references who are not relatives or someone who lives with you.

Name	Address	Phone
		(     )
		(     )
		(     )

**GENERAL**

**Yes No**

Have you worked under any other name? If yes, please give name(s): \_\_\_\_\_

Are you presently employed?

If yes, may we contact your current employer for references?

Have you ever been fired from a job or asked to resign? If yes, please explain:

If hired, will you be able to work overtime?

Have you ever been convicted of any crime during the last ten years (except a minor traffic violation)?

If yes, give details: \_\_\_\_\_

(A conviction will not necessarily disqualify you from employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).

## APPLICANT'S CERTIFICATION AND AGREEMENT

***PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING.***

I certify that all information provided in this employment application is true and complete. I understand that any false, incomplete, or misleading information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize and agree to cooperate in a thorough investigation of all statements made herein and other matters relating to my background and qualifications. I understand that any investigation conducted may include a request for employment and educational history, credit reports, consumer reports, investigative consumer reports, driving record, and criminal history. I authorize any person, school, current and former employer, consumer reporting agency, and any other organization or agency to provide information relative to such investigation and I hereby release all persons and entities requesting or supplying information pursuant to such investigation from all liability or responsibility to me for doing so. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event that I am hired. I release the Company from any and all liability of whatever kind or nature which, at any time, could result from obtaining and basing an employment decision on such information.

I understand that I may be required to successfully pass a drug-screening test. I hereby consent to a pre-and/or post-employment drug screen as a condition of my employment, subject to applicable law.

I understand that should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of the Company. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Company may terminate my employment at any time with or without notice or cause.

I have read, understand, and by my signature consent to these statements.



\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date