



Office: 610-916-0237
 Toll Free: 888-514-3835
 Fax: 610-916-0238

Application for Employment

Your interest in Elite Fuel Service is sincerely appreciated. Please complete this application in full and attach any information you feel would be helpful in hiring you, including copies of any certifications you may have.

Personal Information			Date of Application:
Full Name:			Date Birth:
Street Address			Social Security Number:
City	State	Zip Code	How long have you lived here? _____
Home Phone	Cell Phone	Desired Start Date:	If hired can you provide proof of right to legally work in the USA? <input type="checkbox"/> Yes <input type="checkbox"/> No
Position applied for:		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	Rate of pay desired? _____
Do you have a CDL License? <input type="checkbox"/> Yes <input type="checkbox"/> No IF yes, list classifications below:		Do you have any certifications? <input type="checkbox"/> Yes <input type="checkbox"/> No IF yes, list them below:	
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No IF yes, please explain below. A Criminal conviction will not necessarily prevent your employment consideration.			
Have you ever served in the U.S. Military? <input type="checkbox"/> Yes <input type="checkbox"/> No IF yes, please list dates of duty and branch below:			Are you currently a Reservist? <input type="checkbox"/> Yes <input type="checkbox"/> No

Education	Name and Location	Graduate	Subject Studied or Degree Rec'd
High School		<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other		<input type="checkbox"/> Yes <input type="checkbox"/> No	

General	Elite Fuel Service provides 24-Hour Emergency service and delivery to our customers. This commitment may require you to work overtime, weekends, and holidays when necessary. Please explain if there is any times(s) that you would not be available to work: _____
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Employment History ... Start with your current or most recent employer.

Employed:	FT	PT	Company Name	Phone Number
From:	To:			
Rate of pay	Street Address			Immediate Supervisor
Reason for leaving	City	State	Zip Code	Supervisor's Phone #
Position Title and Description				May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employed:	FT	PT	Company Name	Phone Number
From:	To:			
Rate of pay	Street Address			Immediate Supervisor
Reason for leaving	City	State	Zip Code	Supervisor's Phone #
Position Title and Description				May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No

Employed:	FT	PT	Company Name	Phone Number
From:	To:			
Rate of pay	Street Address			Immediate Supervisor
Reason for leaving	City	State	Zip Code	Supervisor's Phone #
Position Title and Description				May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No

I have read and completed all of the material and information contained in this Employment Application form. I verify that all of the information I have supplied is true and correct to the best of my knowledge, information and belief, and that I have not withheld any information requested. I understand that in the event that I am hired by Elite Fuel Service ... and it is later determined that I made a material misrepresentation or failed to provide certain information requested; I may be subject to immediate discharge by the company. I authorize any former employer, person, firm, corporation or government agency to answer any and all questions and to release or provide any information within their knowledge or records and I agree to hold any and all of them blameless and free of liability for releasing any information that is within their knowledge that is within their records (please check one) **including my present employer** or **excluding my present employer**. In consideration of my employment I understand the company has rules and regulations that will govern my employment relationship. This application is not an employment contract.

Applicant's Signature: _____ Date: _____

I understand Elite Fuel Service will require a urine sample to determine drug and alcohol contamination. I realize a positive drug/alcohol test will disqualify me from employment. If an offer of employment is made, the company will require a physical evaluation to determine fitness for duty. I authorize you or another entity to make such investigations of my employment, criminal history and other related matters in arriving at an employment decision. I hereby release employers, schools, or individuals from all liability in responding to inquiries in connection with my employment.

Applicant's Signature: _____ Date: _____

Name of Applicant: _____ Date: _____

Driving Experience

Driver's Licenses	State	License Number	Class & Endorsement	Expiration Date

1. Have you ever been denied a license, permit or privilege to operate a motor vehicle? Yes No
2. Has any license, permit or privilege ever been suspended or revoked for any reason? Yes No
3. Have you had any accidents in the past three years? Yes No

IF THE ANSWER TO QUESTION 1 OR 3 ABOVE IS YES, ATTACH STATEMENT GIVING DETAILS.

Class of Equipment	Type of Equipment (Van, Tank, Flat, etc)	Dates		Approximate # of
		From	To	
Straight Truck				
Tractor and Semi-Trailers				
Other				

Fuel Truck Driver: Have you delivered any of the below fuels? Yes No (If yes, please circle those that apply)

Heating Oil Off Road Fuel On Road Fuel Propane Gasoline Propane Other: _____

Service Experience: Have you serviced any of the below types of Equipment? Yes No (If yes, please circle those that apply)

Boiler: Oil Propane Furnace: Oil Propane Steam Boiler: Oil Propane Central Air Conditioning Heat Pump

List Other Equipment you have serviced: _____

Have you installed any equipment? Yes No Commercial Residential Both (If yes, please circle those that apply)

If yes, please list types of equipment installed: _____

Management Experience: Have you had any management experience? Yes No (If yes, please circle those that apply)

Managed up to 5 employees Computer Skills Ordering parts/equipment Billing/Invoicing Teaching Service Skills Motivator/Organizer

Were you referred to our company? Yes No If yes, who referred you? _____

If no, how did you find out about us? _____