

EMPLOYMENT APPLICATION



SECTION ONE – GENERAL

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____ SOCIAL SECURITY NUMBER (OPTIONAL) _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

HOME E-MAIL ADDRESS _____ HOME TELEPHONE NUMBER _____ CELL PHONE NUMBER _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE USA? YES NO (IF YES, VERIFICATION WILL BE REQUIRED)
POSITION APPLYING FOR _____
I AM SEEKING A POSITION THAT IS FULL-TIME PART-TIME TEMPORARY FROM _____ TO _____
HAVE YOU EVER APPLIED FOR A POSITION WITH THE PETROLEUM CLUB OF ANCHORAGE? YES NO IF YES, WHEN: _____
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION WITH OR WITHOUT ACCOMODATION? YES NO
IF NECESSARY FOR THE JOB I AM ABLE TO: WORK SHIFTS YES NO (IF YES, WHICH SHIFTS?) _____ WORK OVERTIME YES NO
PROVIDE A VALID DRIVERS LICENSE YES NO (VERIFICATION REQUIRED) IF NECESSARY FOR THE JOB, I AM OVER UNDER 21 YEARS OF AGE.
I WILL BE ABLE TO REPORT TO WORK _____ DAYS AFTER BEING NOTIFIED THAT I AM HIRED

SECTION TWO – EMPLOYMENT HISTORY

PLEASE COMPLETE – INCOMPLETE APPLICATIONS WILL DISQUALIFY CANDIDATES FOR CONSIDERATION

LIST LAST EMPLOYMENT FIRST. INCLUDE MILITARY SERVICE, SUMMER AND TEMPORARY JOBS. BE SURE ALL YOUR EXPERIENCE OR EMPLOYERS RELATED TO THIS JOB ARE LISTED HERE, ON AN INCLUDED RESUME, OR USE AN EXTRA SHEET OF PAPER IF NECESSARY.

EMPLOYER NAME AND ADDRESS	POSITION TITLE/DUTIES/SKILLS	DATES EMPLOYED FROM _____ TO _____
		SALARY/WAGE _____
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	SUPERVISOR'S NAME _____ TELEPHONE _____	REASON FOR LEAVING _____

EMPLOYER NAME AND ADDRESS	POSITION TITLE/DUTIES/SKILLS	DATES EMPLOYED FROM _____ TO _____
		SALARY/WAGE _____
MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	SUPERVISOR'S NAME _____ TELEPHONE _____	REASON FOR LEAVING _____

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MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	SUPERVISOR'S NAME _____ TELEPHONE _____	REASON FOR LEAVING _____

SECTION THREE – LICENSES/CERTIFICATIONS/SKILLS

PROFESSIONAL LICENSES, CERTIFICATIONS OR REGISTRATIONS (TAPS, SERVESAFE CERTIFICATIONS): _____

ADDITIONAL SKILLS INCLUDING SUPERVISION SKILLS, OTHER LANGUAGES, OR INFORMATION REGARDING THE CAREER/OCCUPATION YOU WISH TO BRING TO THE EMPLOYER'S ATTENTION: _____



 LAST NAME FIRST NAME MIDDLE NAME

SECTION FOUR - EDUCATION

SCHOOL NAME/LOCATION	YEARS COMPLETED	FIELD OF STUDY	GRADUATE OR DEGREE
HIGH SCHOOL			
COLLEGE/UNIVERSITY			
BUSINESS/TECHNICAL			
OTHER			

SECTION FIVE – REFERENCES

LIST THREE REFERENCES (OTHER THAN RELATIVES) WHO HAVE KNOWLEDGE OF YOUR WORK EXPERIENCE AND ABILITIES:

NAME	COMPANY AND CITY/STATE	TITLE	TELEPHONE NUMBER	YEARS KNOWN

SECTION SIX – CONVICTIONS/CRIMINAL HISTORY

HAVE YOU EVER BEEN CONVICTED OF ANY VIOLATION OF THE LAW, OTHER THAN FOR MINOR TRAFFIC VIOLATIONS? NO YES IF YES, PLEASE EXPLAIN BELOW WITH DATE OF CONVICTION. ANY DWI/DUI MUST BE LISTED. (DISCLOSING INFORMATION ABOUT CONVICTIONS WILL NOT RESULT IN AUTOMATIC DISQUALIFICATION FOR CONSIDERATION FOR EMPLOYMENT.)

SECTION SEVEN – HOW DID YOU HEAR ABOUT THIS POSITION?

EMPLOYEE _____ WEBSITE _____ NEWSPAPER _____
 PUBLICATION _____ WORD OF MOUTH _____ OTHER _____

SECTION EIGHT – INFORMATION TO APPLICANT

I certify that all of the information contained in this application is true and complete. I understand that false or omitted information or the inability to satisfy any necessary employment requirements may be grounds for not hiring me or for immediate termination of employment at any point in the future. I authorize the verification of any or all information listed above. I release the Petroleum Club of Anchorage and any previous employers and supervisors from liability for any claims or injuries that may result from furnishing information to the Petroleum Club of Anchorage.

I understand the Petroleum Club of Anchorage is an at-will employer. This means the company or I can terminate the employment relationship at any time, with or without cause.

I agree to submit to any lawful drug testing that may be required as a condition of employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.

I acknowledge that an offer of employment will require me to provide proof of identity and eligibility to work in the United States, and be contingent upon successfully passing background check. I understand a physical assessment and a valid driver's license may also be required as a condition of employment.

 APPLICANT SIGNATURE

 DATE

EQUAL EMPLOYMENT OPPORTUNITY: We do not discriminate on the basis of race, color, national origin, religion, sex, gender, age, physical and mental disability, veteran status, marital status, pregnancy, sexual orientation or any characteristic prohibited by federal, state or local law.



VOLUNTARY SELF-IDENTIFICATION

(CONFIDENTIAL – FOR STATISTICAL USE ONLY)

The Petroleum Club of Anchorage is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, religion, sex, gender, age, physical and mental disability, veteran status, marital status, pregnancy, sexual orientation or any other classification protected by federal, state or local law.

As an Equal Opportunity Employer, we are subject to certain federal equal employment recordkeeping requirements. In order to comply, we request employees to voluntarily self-identify their race and ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. If you elect not to provide this information, a determination will be made based on visual observation.

PLEASE COMPLETE IN FULL:

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Sex: Male Female Application Date _____ Office Use Only: Hire Date: _____

Job Title Applied for: _____ Job Group #: _____

RACE / ETHNICITY:

I choose not to disclose this information at this time.

Are you Hispanic or Latino?

Yes No

If no, what race do you consider yourself to be:

- White (*Not Hispanic or Latino*)
- Black or African American (*Not Hispanic or Latino*)
- Native Hawaiian or Other Pacific Islander (*Not Hispanic or Latino*)
- Asian (*Not Hispanic or Latino*)
- American Indian or Alaska Native (*Not Hispanic or Latino*)
- Two or more races

DEFINITIONS OF RACE AND ETHNICITY CATEGORIES:

- **HISPANIC OR LATINO:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- **WHITE (NOT HISPANIC OR LATINO):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- **BLACK OR AFRICAN AMERICAN (NOT HISPANIC OR LATINO):** A person having origins in any of the black racial groups of Africa.
- **NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER (NOT HISPANIC OR LATINO):** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **ASIAN (NOT HISPANIC OR LATINO):** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- **AMERICAN INDIAN OR ALASKA NATIVE (NOT HISPANIC OR LATINO):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- **TWO OR MORE RACES (NOT HISPANIC OR LATINO):** All persons who identify with more than one of the above five races.

Personal and Confidential

This page contains sensitive information

Store in secure "Affirmative Action Forms" files, separate from personnel records!