



167 FLANDERS-NETCONG RD
FLANDERS, NJ 07836

APPLICATION FOR EMPLOYMENT
(AN EQUAL OPPORTUNITY EMPLOYER)

DATE: _____

NAME:

LAST

FIRST

MIDDLE INITIAL

HAVE YOU EVER WORKED UNDER A DIFFERENT NAME? _____

IF SO, WHAT NAME? _____

CURRENT ADDRESS:

STREET ADDRESS

CITY

STATE

ZIP CODE

HOW MANY YEARS HAVE YOU LIVED AT THIS ADDRESS? _____

TELEPHONE NUMBER: _____

EMAIL: _____

POSITION APPLYING FOR: _____

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? _____

IF HIRED, PROOF OF CITIZENSHIP OR LEGAL STATUS WILL BE REQUIRED

PREVIOUS EMPLOYERS – PLEASE LIST LAST (3) THREE

Employer Name	Address	Position	Reason for Leaving

EDUCATIONAL BACKGROUND

Type of school	Name and Address of school	Graduated Y or N	Major and Minor, if applicable
GRAMMAR OR GRADE SCHOOL			
HIGH SCHOOL			
COLLEGE			
POST GRADUATE			

What hours would you like to work? Full Time Part Time

Are you available to work overtime, if asked?

Please specify days and hours available: _____

Salary Requirement: \$ _____

Have you ever worked for Petillo Incorporated before? If yes, when? _____

List any relatives working for Petillo Incorporated: _____

If hired, on what date will you be available to start? _____

Do you have a VALID Driver's License? Yes No

Do you have a VALID CDL? Yes No

Are there any experiences, skills or qualifications which you feel would be an asset for our company?

Do you have reliable transportation? Yes No

Have you had any automobile accidents in the past three years? Yes No

If Yes, please describe:

Have you had your driver's license suspended for any reason during the past three years?

Yes No

If Yes, please explain:

APPLICANT'S STATEMENT

I certify that the answers given on this application are true and complete to the best of my knowledge.

I hereby understand and acknowledge that any employment relationship with Petillo, Inc. (hereinafter "the COMPANY") is of an **"at will"** nature, which means that I may resign at any time and the COMPANY may discharge me at any time with or without cause.

It is further understood that this **"at will"** employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the President of the COMPANY.

In the event of employment, I understand that false or misleading information given in my application or interview(s) will result in disciplinary action, up to and including termination of employment, and that I will be responsible for any damage or expense incurred by the Company arising out of the fact that any information in the application or interview(s) was false or misleading.

I understand, also, that I am required to abide by all rules and regulations of the COMPANY.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I further authorize past employers to release information, relative to my employment with them.

NAME (PLEASE PRINT)

SIGNATURE

DATE