

Fabian Oil Inc
PO Box 99
Oakland, Maine 04963

Application for Employment
(Please Print)

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, gender, national origin, religious persuasion, marital status, sexual orientation,, genetic information, political belief, or disability that does not prohibit performance of essential job functions.

Date: _____

I. Personal Information

Name: Last _____ First _____ Middle _____

Present Address _____

Permanent Address (if different than above) _____

Social Security Number _____

Telephone _____

Cell Phone _____

Email Address _____

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Position Applied For: _____

1. Are you physically able to perform the duties of the job you are applying for with reasonable accommodation?

___ Yes ___ No If no please explain:

2. Do you have any relatives who are presently (or have formerly been) employed by Fabian Oil?

3. How were you referred to Fabian Oil? _____

4. Have you ever been convicted of a crime? ___ Yes ___ No If yes, please explain: _____

5. Do you hold a valid Maine driver's license? ___ Yes ___ No License Number: _____

II. Educational History

School Name/Location	Years Completed	Degree/Diploma
Elem/Jr. High _____		
High School _____		
College _____		
Tech. Training _____		
Other _____		

III. Employment Record *Please include all employment for the last five years.*

1.	_____	_____
	Company Name (Current or Most Recent Employer)	Position Held
	_____	Dates Employed: _____
	Address	From To
	_____	_____
	Manager / Supervisor	Telephone Wage/Salary
	_____	_____
	Reason For Leaving	
2.	_____	_____
	Company Name (Next Most Recent)	Position Held
	_____	Dates Employed: _____
	Address	From To
	_____	_____
	Manager / Supervisor	Telephone Wage/Salary
	_____	_____
	Reason For Leaving	
3.	_____	_____
	Company Name	Position Held
	_____	Dates Employed: _____
	Address	From To
	_____	_____
	Manager / Supervisor	Telephone Wage/Salary
	_____	_____
	Reason For Leaving	

NOTE: Use a separate sheet to list additional employers, if necessary. We will contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

(Employer's Name)	Reason
(Employer's Name)	Reason

IV. References *Please do not include relatives or former employers.*

1.	_____	_____
	Name	Years Known
	_____	_____
	Address	Telephone

	Occupation	
2.	_____	_____
	Name	Years Known
	_____	_____
	Address	Telephone

	Occupation	
3.	_____	_____
	Name	Years Known
	_____	_____
	Address	Telephone

	Occupation	
4.	_____	_____
	Name	Years Known
	_____	_____
	Address	Telephone

	Occupation	

V. Work Availability

1. If your application receives favorable consideration, when will you be available to begin work?

2. Do you have any objection to working overtime? Yes No
3. Can you work overtime without prior notice? Yes No
4. Can you work on Saturday? Yes No
5. Can you work on Sunday? Yes No
6. Can you travel if required by this position? Yes No

VI. Salary / Hourly Rate Requirements

If your application receives favorable consideration, what salary/hourly rate would you require?

\$ _____ per _____

Background Research Release

Please read this section carefully and acknowledge your understanding by signing your name in the space below.

I certify that all of the statements made by me on this application for employment are true, correct, and complete to the best of my knowledge.

1. Consent To Conduct Background Investigation

As a condition of and in consideration for Fabian Oil's consideration of this application, I give permission to Fabian Oil to investigate my personal and employment history. I understand that this background investigation will include, but not be limited to, verification of all information on this application, as well as interviews with past employers and a PRE-EMPLOYMENT EVALUATION REPORT (P.E.E.R.) conducted by the Maine Credit Bureau. I further give permission to Fabian Oil to conduct this investigation and to discuss the results of this investigation in connection with my application for employment.

2. Consent To Contact Past Employers

I give permission to Fabian Oil to contact all employers listed in this application (except those specifically excluded) for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Fabian Oil, consent to the release of such information orally or in writing, and hereby release them from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of Fabian Oil. I further agree to indemnify all past employers for any liability they may incur because of their reliance upon this release.

3. Consent To Contact Government Agencies

I give permission to any agent, attorney or representative of Fabian Oil to receive a copy of any information obtained in the file of any federal, state or local court, governmental agency, law enforcement agency or investigator concerning or relating to me. I further consent to the release of such information. In the event a state law does not provide for prospective employers to have access to information, I hereby delegate Fabian Oil as my agent for receipt of information. I understand that the scope of this investigation will be limited to criminal and/or civil records that relate to my honesty, integrity and/or abilities.

4. Cooperation With Investigation

I agree to fully cooperate in Fabian Oil's background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state or local governmental agency will not release reference information or criminal history information directly to the employer, I agree to personally request such information to the extent permitted by law.

5. Falsification Statement

I understand that any falsification or willful omission of fact made in this application or in connection with any background investigation may be sufficient grounds for rejection of this application, or, if discovered after an offer of employment, for immediate dismissal.

6. Employment "At Will"

In consideration of my employment, I agree to conform to the rules and regulations of Fabian Oil, and my employment and compensation is "at will" in that they can be terminated with or without cause, and with or without notice, at any time, at the option of either Fabian Oil or myself, except as otherwise provided by law. I understand that no manager or representative of Fabian Oil, other than the President of Fabian Oil, has authority to enter into any agreement for employment for any specified period of time or to make any agreement or contract to the foregoing, and that any promises to the contrary will only be relied upon by me if they are in writing and signed by the President of Fabian Oil.

X _____

Applicant's Signature

X _____

Date

Disclosure Statement

A consumer report may be obtained on you for employment purposes. It may be an "investigative consumer report" that includes information as to your character, general reputation, personal characteristics, and mode of living. For investigative consumer reports, you have the right to request disclosure of the scope of the report, which involves personal interviews with sources such as your neighbors, friends, or associates.

Authorization

I voluntarily and knowingly authorize *Fabian Oil Inc.* or its authorized agents, for employment purposes only, to obtain or prepare consumer reports or investigative consumer reports as part of the process of my applying for employment, including independent contractor assignments as applicable. I understand that if *Fabian Oil Inc.* hires me or contracts for my services, my consent will apply, and *Fabian Oil Inc.* or its authorized agents may prepare and obtain consumer reports or investigative consumer reports throughout my employment or contract period.

Please provide all requested information below.

-----	-----	-----	-----
First Name	Middle Name	Last Name	Suffix

Other Names Used

-----	-----
Current Address	Since

-----	-----
Previous Address	From-To

-----	-----
Previous Address	From-To

-----	-----
Social Security Number	Date of Birth*

-----	-----
Drivers License #	State Issued

-----	-----
Signature	Date

*Date of birth is being requested for identification purposes only in obtaining accurate retrieval of records and will not be used for discriminatory purposes.