Consumers Cooperative Oil Co.
1218 10th Ave.
Clarkfield, MN 56223
320-669-4426 800-322-4426
Fax: 320-669-4428

APPLICATION FOR EMPLOYMENT

Personal Information:

Name_____

Address_____

City_____ State_____ Zip Code_____

Home Phone_____ Cell Phone_____

Position Applied For_____ Expected Rate_____

Job Availability: Part Time_____ Full Time_____

Date Available to Start_____

Shift Availability: Nights_____ Weekends_____ Holidays_____

If hired, would you be willing to take a physical examination? _____

Have you ever been convicted of a felony crime? _____

If so, describe in full. _____

_____

_____

_____

Education:

School	City	Course	Graduation Date

High School _____

Vo-Tech _____

College _____

Other (Specify) _____

Job Skills:

Describe skills that you have that would be beneficial for this occupation. _____

_____

_____

_____

What machines can you operate that would be beneficial? _____

_____

_____

_____

Do you have a valid Minnesota Driver's License? _____

Do you have any additional endorsements? _____

Work History:

1. Name_____ Starting Date_____

City_____ State_____ Zip Code_____

Job Title_____ Supervisor_____

Starting Wage_____ Ending Wage_____

Reason for Leaving_____

2. Name_____ Starting Date_____

City_____ State_____ Zip Code_____

Job Title_____ Supervisor_____

Starting Wage_____ Ending Wage_____

Reason for Leaving_____

Indicate (by circling the number) any employer whom you do not wish us to contact.

References:

Name_____ Phone #_____

Address_____

Name_____ Phone #_____

Address_____

Name_____ Phone #_____

Address_____

Name_____ Phone #_____

Address_____

I hereby authorize this company to investigate all statements contained in this application. I understand that any misrepresentation or omission of material facts will be cause for immediate dismissal.

Signature_____ Date_____