

S.S.S. Development, Inc  
D.J. Development, LLC  
Wally Hutter Oil Company  
P.O. Box 49  
Pittsfield, IL 62363  
Phone 217-285-5558  
Fax 217-285-5577



# EMPLOYMENT APPLICATION

Position(s) applying for \_\_\_\_\_

Date Applied \_\_\_\_\_

Time Applied \_\_\_\_\_ am/pm

**PERSONAL INFORMATION** (Please Print in Ink)

Name \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ -- \_\_\_\_\_  
Last First Middle Phone Number

\_\_\_\_\_  
Address City State Zip Code

Please list any other names you have gone by \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_ If less than 10 years, please list all previous addresses (for last 10 years) and length of stay at each \_\_\_\_\_

Are you 21 or over? Yes / No If no, list birth date \_\_\_\_\_

Do you prefer: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Date available to start \_\_\_\_\_

Are you available to work all shifts? \_\_\_\_\_ If no, specify days and hours you are NOT available \_\_\_\_\_

Are you willing to work holidays? \_\_\_\_\_ Weekends? \_\_\_\_\_ Have you ever applied at any Jiffi Stop before? \_\_\_\_\_

Do you have reliable transportation to get to work? \_\_\_\_\_

Circle highest grade completed: High School 1 2 3 4 G.E.D. Other \_\_\_\_\_

**PLEASE READ BEFORE SIGNING**

S.S.S. Development, D.J. Development, and Wally Hutter Oil Co is an Equal Opportunity Employer. All applications are considered for employment without regard to race, color, sex, religion, non-related job disabilities, marital status, veteran status, or national origin.

I give my permission to investigate my credit record, criminal history record, and to communicate with all or any of my existing or previous employers for full information. I hereby indemnify the Company, any government agencies, and any person or company contacted from any liability arising out of such inquiry. I understand that if any false or misleading information or omission on this application is discovered it will be reason for rejection or dismissal. I understand that I have a right to make a written request within a reasonable period of time for a complete and accurate disclosure of information concerning the nature and scope of the investigation.

At the request of the Company, I agree to provide transcripts from educational institutions attended and to submit to any further testing, including drug testing, for employment, continuation of employment or advancement with the Company.

I acknowledge, if employed, my employment is for no fixed period of time. This application or offer of employment is not binding on the Company in any way and is not to be construed as a contract. Employment, benefits, and /or compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. No representative of the Company, other than its President, has the authority to enter into any agreement for employment of any specified period of time, or to make any agreement contrary to the foregoing, and such agreement to be enforceable, must be in writing and signed by the President of the Company.

All newly hired employees are required to serve a probationary period of 90 calendar days. Employees who fail to demonstrate the ability to meet acceptable standards of performance and/or behavior during their probationary period may be terminated immediately.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Drivers license number \_\_\_\_\_ Social Security number \_\_\_\_/\_\_\_\_/\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Start with your present or most recent. Include military service assignments.

1.	Employer	Dates Employed		Work Performed
		From	TO	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title			
	Supervisor			
	Reason for Leaving			
2.	Employer	Dates Employed		Work Performed
		From	TO	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title			
	Supervisor			
	Reason for Leaving			
3.	Employer	Dates Employed		Work Performed
		From	TO	
	Address			
	Telephone Number(s)	Hourly Rate/Salary		
		Starting	Final	
	Job Title			
	Supervisor			
	Reason for Leaving			

**REFERENCES**

List three personal references (not related to you or not anyone listed above), whom you have known at least one year.

Name	Phone	Business/Occupation	Years Acquainted
_____	_____	_____	_____
_____	_____	_____	_____

**SKILLS AND QUALIFICATIONS**

Summarize special skills and qualifications acquired from employment or other experience that would make you a good employee if you were hired for a position at a Jiffi Stop Convenience Store.

\_\_\_\_\_

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