



3947 Middle Country Road, P.O. Box 607, Calverton, NY 11933 • Office 631-369-4299 • Fax 631-369-9299

Peconic Propane is an equal opportunity employer dedicated to nondiscrimination in employment. Peconic Propane selects the best qualified individual for the job based on job-related qualifications regardless of race, age, color, religion, sex, national origin, ancestry, marital status, sexual preference, disability or any other basis protected by applicable law.

 **Print clearly and complete ALL information requested.**

Name _____
First Middle Last

Present Address _____
Street Address City State Zip Code

Permanent Address _____
(if different) Street Address City State Zip Code

Home Phone (_____) _____ - _____ Cell Phone (_____) _____ - _____ Email _____

Driver's License# _____ Class _____

If you are hired, can you furnish proof that you are over 18 years of age?..... ☐ Yes ☐ No

If you are hired, can you present evidence of your legal right to live and work in this country as required by law?.... ☐ Yes ☐ No

Have you ever pled guilty or "no contest" to, or been convicted of, a misdemeanor or felony?..... ☐ Yes ☐ No

If yes, give the date(s) and details _____

Have you been arrested for any matters for which you are out on bail or on your own recognizance pending trial? ☐ Yes ☐ No

If yes, give the date(s) and details _____

Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, time that has passed since the incident, and rehabilitation will be taken into account. (Do not include minor traffic citations, and arrests or convictions which have been sealed or expunged in answering this question.) This information will only be used if job related and consistent with business necessity.

Are you able to satisfactorily perform the essential job duties required of the position for which you are applying, either with or without a reasonable accommodation?..... ☐ Yes ☐ No

Position Desired _____ Date you can start _____ Salary Desired _____

Which do you prefer?..... ☐ full-time ☐ part-time during the following days and hours _____

Are you employed now?..... ☐ yes ☐ no If yes, may we contact your present employer?..... ☐ Yes ☐ No

Have you ever applied to or worked for Peconic Propane before?..... ☐ yes ☐ no If yes, specify dates _____

| Education | Name of School | City and State | # of years completed | Did you graduate? | Degree(s) earned |
|--------------|----------------|----------------|----------------------|-------------------|------------------|
| High School | | | | | |
| College | | | | | |
| Graduate | | | | | |
| Trade School | | | | | |

Have you ever served in the United States Armed Forces?..... ☐ yes ☐ no Branch _____ Final Rank _____

Additional training, skills, experience, and special achievements relevant to position _____



List present and past employers beginning with the most recent. Attach additional sheets as needed.

| Month/Year | Name & Address of Employer | Initial Position and Duties | Previous Supervisor | Starting Pay | Reason for Leaving |
|------------|----------------------------|-----------------------------|---------------------|--------------|--------------------|
| | | Final Position and Duties | Telephone Number | Ending Pay | |
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |
| From | | | | | |
| To | | | | | |

Have you ever been terminated or asked to resign from any job?..... ☐ yes ☐ no If yes, please explain circumstances _____


Please explain fully any gaps in your employment history _____

How many days of work have you missed in the last three (3) years due to reasons other than paid holidays and vacation?

☐ 0 to 10 days ☐ 11 to 30 days ☐ 30+ days

Do you have adequate transportation to and from work?..... ☐ yes ☐ no

Do you have any friends or relative who work for Peconic Propane?..... ☐ yes ☐ no If yes, who? _____

 **List three (3) personal references that know you well but are not previous employers or relatives.**

| Name | Address | Phone Number |
|------|---------|--------------|
| | | |
| | | |
| | | |

This application will be considered active for a maximum of thirty (30) days. If you wish to be considered for employment after that time you must reapply.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.

X _____
SIGNATURE OF APPLICANT PRINT NAME DATE