



## Employment Application

**Instructions:** Please answer all questions accurately. If there is not enough space on this application to allow for a complete answer, you may write the additional information on a plain sheet of paper and attach it to this form.

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

In case of emergency, notify: \_\_\_\_\_  
Name Phone Number Address

Position applying for: \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No

If yes, please explain:

Do you have any health condition(s) which would restrict or affect your ability to perform the job for which you are applying?  Yes

Do you have transportation to and from work?  Yes  No

### Education

Type of School	Name and Location	Did You Graduate? Yes or No	Degree and GPA
High School			
College			
Other			

**Employment History:** Start with present or most recent employer

James River Petroleum  
10487 Lakeridge Parkways, Suite 100  
Ashland, VA 23005  
Office: (804)359-9000 Fax: (804)359-6307

1.) Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Salary: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ May we contact this Company?  Yes  No

2.) Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Salary: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ May we contact this Company?  Yes  No

3.) Company Name: \_\_\_\_\_ Address: \_\_\_\_\_

Job Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Salary: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ May we contact this Company?  Yes  No

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