



Application for At-Will Employment

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT, but is merely intended to evaluate suitability for employment. It is our policy to provide equal opportunity for employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state or federal law. It is also our policy to conduct pre-employment drug screenings before a job offer is made. If a job offer is made, employment will be contingent upon successful completion of a pre-employment drug screen.

POSITION(S) APPLIED FOR: _____

Last Name		First Name		Middle Name	
Address		Street	City	State	Zip Code
Phone (Home)		Phone (Cell)		Social Security #	
Driver's License #		Expiration Date		E-Mail Address	

Have you applied for Humboldt Pacific, LLC before? Y____ N____

Position applied for: _____ When? _____

Expected pay: _____

Date You Can Start: _____ Full time Part time Temporary Other _____

Are you available to work weekends if required? _____

How did you hear about us? _____

Are you eligible to work in the United States? Y____ N____



WORK HISTORY: Please explain all gaps in employment of 30 days or more. Please attach additional pages if needed.

Last Employer (Company Name)		Address (City, State, Zip)		Phone
Position Held	From	To	Reason for Leaving	Salary
Job Duties			May we contact? Y _____ N _____	Supervisor Name & Phone #

Last Employer (Company Name)		Address (City, State, Zip)		Phone
Position Held	From	To	Reason for Leaving	Salary
Job Duties			May we contact? Y _____ N _____	Supervisor Name & Phone #

Last Employer (Company Name)		Address (City, State, Zip)		Phone
Position Held	From	To	Reason for Leaving	Salary
Job Duties			May we contact? Y _____ N _____	Supervisor Name & Phone #

EDUCATION:

	School Name and Address	No. of Years Completed	Did you Graduate?	Degree or Diploma
High School				
College/University				

Additional educational, vocational, professional, military, or other information you feel may be helpful to us in considering your application:



APPLICANT’S STATEMENT:

I, (print name) _____ certify that the information contained in this application is correct to the best of my knowledge, and I understand that any misstatement or omission of information is grounds for ending the hiring process or dismissal. I authorize verification of information provided on this application; and authorize the references listed above to give you all pertinent information concerning my previous employment; and release all parties from all liability for any damage that may result from furnishing same to HPP. In consideration of my employment, I agree to conform to the rules and regulations of Humboldt Pacific Petroleum, LLC.

I further agree that either I or the Company may terminate my employment with or without cause and with or without prior notice, at any time. Finally, I understand that no representative of the Company other than an Executive Officer has the authority to enter into any agreement for employment for any specified period of time, or to otherwise alter the foregoing.

Furthermore, I understand there will not be a job offer, any pay, or any reimbursement of funds from Humboldt Pacific Petroleum, LLC until I successfully pass a pre-employment drug test per the hiring policy of Humboldt Pacific Petroleum, LLC

Signature of Applicant: _____ **Date:** _____