



Application for Employment (Catalina Mart)

AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, sex, national origin, marital or veteran status, the presence of any physical or mental condition or disability, or any other legally protected status.

PLEASE READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY. Only completed applications will be evaluated, do not indicate, "see resume". If you require accommodation due to a disability in order to complete the application, please let us know what accommodation you require. LCC refers to Loma Catalina Company, LLC

APPLICANT INFORMATION

Date _____

NAME _____ SS# _____
LAST FIRST MIDDLE

Have you ever worked under a different name? No Yes. Please state. _____

Current Address _____
STREET APT. NO CITY STATE ZIP

Home Phone# () _____ Other Phone # () _____ Work Hours _____
Circle one: cell or work#

Do you have the legal right to work in the U.S.? Yes No. Please explain _____

POSITION YOU ARE APPLYING FOR _____ Referred by _____

Preferable location:

<input type="checkbox"/> NE	Bear Canyon & Tanque Verde Kolb and Sunrise	<input type="checkbox"/> Central	Silverbell and Grant Campbell and Prince 1 st and Wetmore
<input type="checkbox"/> NW	Old Father and Ina Oracle and Magee	<input type="checkbox"/> Catalina	
<input type="checkbox"/> SE	Thornydale and Linda Vista Kolb and 22 nd	<input type="checkbox"/> Any	
<input type="checkbox"/> SW	Kolb and Broadway Pantano and Golf Links Houghton and Broadway		
<input type="checkbox"/> Other _____	Park and Benson Highway Santa Cruz and Irvington		

(State specific store)

AVAILABILITY

I am available to work the following: Full-time Part-time Days Evenings Overnight Any

What hours are you available to work? _____

If your application is considered favorably, on what date will you be available for employment? _____

Have you ever applied for employment with us? No Yes. When? _____ Where? _____
Month Year Local Office Name

Were you previously employed by LCC or Chevron Stations Inc. or Roadrunner Depot? No Yes

If Yes, give dates: from _____ to _____ Where? _____
Month Year Month Year Local Office Name

Position _____ Reason for leaving _____

Are you related to any LCC employee? No Yes. Please explain _____

CRIMINAL BACKGROUND

HAVE YOU EVER BEEN CONVICTED OF A FELONY? No Yes. Give details, dates, places, charges, final disposition. Do not include moving or parking violations or infractions. Do include anything more serious (a conviction will not necessarily disqualify you from employment).

Are you now awaiting trial or sentencing for any felony? No Yes. If so, give details _____

EMPLOYMENT: List all of your previous employers for the past seven years. Start with you current or most recent employer.

1. Employer _____ Phone () _____

Employer's address _____

STREET CITY STATE ZIP

Employed from _____ to _____ Salary\$ _____ per _____

Position _____ Supervisor's Name _____ Reason for leaving _____

2. Employer _____ Phone () _____

Employer's address _____

STREET CITY STATE ZIP

Employed from _____ to _____ Salary\$ _____ per _____

Position _____ Supervisor's Name _____ Reason for leaving _____

3. Employer _____ Phone () _____

Employer's address _____

STREET CITY STATE ZIP

Employed from _____ to _____ Salary\$ _____ per _____

Position _____ Supervisor's Name _____ Reason for leaving _____

4. Employer _____ Phone () _____

Employer's address _____

STREET CITY STATE ZIP

Employed from _____ to _____ Salary\$ _____ per _____

Position _____ Supervisor's Name _____ Reason for leaving _____

Please explain any gaps in employment:

EDUCATION

	High School	College	Graduate/Professional
School Name and Location			
Circle highest grade completed	9 10 11 12	1 2 3 4 5 +	1 2 3 4 5 +
Degree earned			
Major Studies			

BACKGROUND INVESTIGATION DATA

LCC will conduct a background check on applicants selected for employment. As part of your background check, you must provide the information requested below for the last SEVEN YEARS for both your residence and your past employment. If you need an additional space, please use a blank sheet of paper.

RESIDENCE: List all your addresses for the past seven years, starting with your current address.

Current Address (Please note: This must be your residence, not your mailing address)

1. _____ How Long? _____
STREET APT. NO. CITY STATE ZIP

Previous Address

2. _____ How Long? _____
STREET APT. NO. CITY STATE ZIP

3. _____ How Long? _____
STREET APT. NO. CITY STATE ZIP

PERSONAL REFERENCES

List 3 personal references. Do not include relatives, in-laws, or people who share your current address. Give complete and accurate information.

1. _____
NAME STREET APT. NO. CITY STATE ZIP

Phone # () _____ Years known _____

2. _____
NAME STREET APT. NO. CITY STATE ZIP

Phone # () _____ Years known _____

3. _____
NAME STREET APT. NO. CITY STATE ZIP

Phone # () _____ Years known _____

PLEASE READ CAREFULLY SIGN AND DATE BELOW:

I hereby declare that the information provided by me in this application for employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement, false statements or omission of fact on this application shall result in rejection of this application or termination of employment. I understand that this application is valid for thirty days. I must reapply to be considered after this period. I understand that all job offers made by an authorized representative of Loma Catalina Company are contingent upon passing a drug screen, presenting documents to conform with the Immigration Reform and Control Act and form I-9, and background investigation. In consideration of my employment, I agree to conform to the rules and regulations of Loma Catalina Company. and that my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of the company or myself. I understand that only the President of the Company has the authority to enter into any employment agreement for specified period of time and that such agreement must be in writing.

All applicants being considered for employment must submit to and pay for a drug screen at J2 Laboratories, 3640 N. 1st Avenue, Tucson, AZ, on the day specified by your interviewer. You must initially pay \$27.00 for the drug screen. LCC will reimburse all applicants from whom we request a drug screen if the report we receive is negative for all illegal and undisclosed controlled substances for which we test, whether or not you are ultimately hired. LCC will not reimburse for drug screens that are positive for illegal substances.

APPLICANT'S SIGNATURE

DATE

APPLICANT: DO NOT WRITE IN THE SPACE BELOW. TO BE COMPLETED BY LCC.

Interviewed by:	Date:	Hired by:	Date:
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