



126 Rhue Street
 PO Box 688
 Ahoskie, NC 27910

Telephone (252) 332-2131 | Fax (252) 332-7611

Application for Employment

Jernigan Oil Company is an equal opportunity employer.

Application Checklist

Please complete and submit **all sections** of the form following instructions on Page 5.

- | | | | | |
|------------------------------------|-------------------------------|-------------------------------|----------------------------|----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Applicant Details
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Applicant Details		
Name: _____		
<i>First</i>	<i>Middle</i>	<i>Last</i>
Contact Address	Previous Address	
Street:	Street:	
City, State:	City, State:	
Zip:	Zip:	
How long have you lived at your current address?	How long have you lived at your previous address?	
Phone Number:	Email:	
Social Security Number:	Date of Birth:	
Are you legally eligible to work in the US?		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Are you aged 18 or over?		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
Military Service		
<i>If you have ever served in the U.S. Military, please give details of your service below.</i>		
Military Branch:		
Duties:		
Have you ever worked for Duck Thru Food Stores or Jernigan Oil Company, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please give details	Location:	Duration:
Reason for Leaving:		
Education History – <i>Please give details of your education history below.</i>		
Circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12		
Name of Junior College, Vocation/ Technical School, or University Attended:		
Major:	Degree:	
Specialized Skills or Honors:		



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Work Details

What type of job is this application for? *(Write job title below)*

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Are you seeking full- or part-time employment?

Expected Pay:

Full-Time

Part-Time

Date Available:

Please enter your preferred working hours below.

Note: Jernigan Oil Company attempts to accommodate each employee's preferred schedule, but in some cases employees may be asked to work other hours than those preferred.

Start:							
Finish:							
	Mon	Tues	Wed	Thurs	Fri	Sat	Sun

Lifting items weighing up to 50 lbs. may be required. Would you be able to do this on your own?

Yes

No

Note: Applicants will not necessarily be disqualified for being unable to participate in this job duty.

Constant physical activity (e.g. assisting customers, stocking shelves, cleaning store and property, etc.) is necessary in many of our roles. Are you able to perform these types of duties throughout your entire shift on your own or with reasonable accommodation? Yes No

Do you have a reliable method of transportation to work as scheduled? Yes No

If No, please explain:

Regular attendance of the job by all employees is necessary for the efficient operation of our stores. Is there any reason why you could not comply with this? Yes No

If Yes, please explain:

Person to notify in the event of an emergency:

Name	Address	Telephone
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Are you related by blood or marriage to anyone now working for Duck Thru Stores or Jernigan Oil Company, Inc.?

Yes No If Yes, please identify the person(s) below:

Name	Relationship	Work Location
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Have you been convicted of any crime? Yes No

If Yes, please explain:



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Work History

In the space provided below, please provide your work history in consecutive order, with present or most recent employer listed first. If self-employed, please give firm name and supply business references. If more space is needed, please continue on an additional sheet.

Employer	Telephone	Dates Worked To From	Title
----------	-----------	--	-------

Address

Reason for Leaving:

Employer	Telephone	Dates Worked To From	Title
----------	-----------	--	-------

Address

Reason for Leaving:

Employer	Telephone	Dates Worked To From	Title
----------	-----------	--	-------

Address

Reason for Leaving:

Employer	Telephone	Dates Worked To From	Title
----------	-----------	--	-------

Address

Reason for Leaving:

Other than the above, please list any Convenience Stores or Gas Stations you have worked at during the last ten years:

Have you ever been discharged from an employer for any reason, including theft or dishonesty?

Yes

No

If Yes, please explain:

Were you paid at the sub-minimum training wage under a previous employer?

Yes

No

If Yes, please give the name and address of the employer:



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Personal References

Please list three personal references, other than former employers or relatives.

Name	City/State	Occupation	Telephone	Years Known

Job Applicant Agreement

PLEASE READ CAREFULLY

I understand the Company requires certain information about me to evaluate my qualifications for employment and conduct its business if I become an employee. I understand that the Company will attempt to verify statements made on my application and made during my employment interview, and that if any information is found to be false in any respect, I may be dismissed. The use of this application does not indicate there are positions open and does not in any way obligate this Company.

I authorize personal references as well as developed references, other persons, companies, corporations, credit bureaus, schools, and law enforcement agencies to furnish to the Company and its agents any information they have concerning me which may include my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of this investigation.

In consideration of my potential employment, I agree to conform to the rules of this Company. I understand that if hired by the Company, my employment is at-will, meaning that I have the right to terminate my employment at any time with or without notice, with or without cause, and that the Company has the same right. I understand my employment by this Company does not constitute a guarantee that any position be continued for any length of time or that any job assignment or shift be permanent. I acknowledge that no one, other than the Exec. Vice President of the Company, has the authority to make any agreement to the contrary and any such agreement must be in writing and signed by the parties.

I understand that I may be required to work scheduled and unscheduled overtime and scheduled weekend and holiday work when required by Duck Thru Food Stores/Jernigan Oil Co., Inc. The Immigration Reform and Control Act of 1986 requires that, after employment, employers verify the legal work authorization and identity of all new employees. An offer of employment will depend upon the Company's ability to verify this necessary information.

I understand that applications are only valid for 60 days, after which time I must reapply for consideration.

I understand that an offer of employment may be conditioned upon the successful completion of a test for drug and/or alcohol abuse and may be conditioned upon the successful completion of a physical exam, and I will upon request sign all necessary consent forms necessary so Duck Thru Food Stores/Jernigan Oil Co., Inc., may complete its examination of my physical condition for the purpose of determining my ability to perform the essential functions of the job. Failure to sign this consent and the necessary consent forms will be deemed a withdrawal of my application for employment.

Place your initials in the appropriate space to indicate and document your consent to this authorization.

Yes

No

 Signature

 Date

Authorization to Release Employment Reference Information

I understand that the Company will attempt to verify statements made on my application and made during my employment interview. When contacted by this Company, I will give my permission for my former employers to answer any and all questions based upon information available to them in my prior employment records. I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of the Company's review of this application, I release this Company and all former employers from any liability as a result of the furnishing and receiving of this reference information. I understand that my failure to sign this reference release so the Company can contact references and make a full background check of my previous work history will be deemed interference with and a withdrawal of my application for employment.

Place your initials in the appropriate space to indicate and document your consent to this authorization.

Yes

No

 Signature

 Date



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Additional Documents

If you wish to include additional pages or documents with your application, please list them here and attach the listed documents with your application.

1	
2	
3	
4	
5	

Please mail or deliver completed form to:
 Jernigan Oil & Propane
 Duck Thru Food Stores
 ATTN: Human Resources Department
 P.O. Box 688
 Ahoskie, NC 27910

OFFICE USE ONLY - Do not write in this section			
Employee Name:		Soc Sec Num:	
Mailing Address:		Birthdate:	
City, State, Zip:		Last Date of Employment:	
Phone Number:		Employee #:	
I-9 Status: Y=Yes, N=No, P=Pending		Base Store #:	
Rate of Pay:	Pay FREQ:	H=Hourly, W=Weekly, S=Semi-Monthly, M=Monthly	
	Pay TYPE:	H=Hourly, S=Salary	
State W/H:	Extra State W/H:	State Code:	
Federal W/H:		Extra Federal W/H:	
Duck Thru Job Class:	1=Manager, 2=MIT, 3=Asst. Manager, 4=Sales Associate, 5=Kitchen Manager, 6=Cook, 7=Pizza Maker		
Jernigan Oil Co. Job Class:	8=Driver, 9=Maintenance, 10=Office, 11=Supervisor		
Date Hired:		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	
Rehire?: <input type="checkbox"/> Yes <input type="checkbox"/> No			