APPLICATION FOR EMPLOYMENT

Adkins Energy LLC
4350 W Galena Rd
Lena, IL 61048
Phone: (815) 369-9173 Fax: (815)369-2043
www.adkinsenergy.com

PERSONAL DATA: Date: _____20____

Name _____
Last First Middle Initial

Previous/Maiden Name _____

Address, City & State _____

Phone _____

Please check the appropriate response.

1. Are you 18 years of age or older? _____ Yes _____ No
2. Do you have the legal right to work in this country? _____Yes _____No

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POSITION APPLYING FOR:

Position applying for _____

Have you been previously employed by Adkins Energy LLC? _____Yes _____No

If yes, former position title & employment dates _____

Were you referred to work here by someone? _____Yes _____Who

Availability: ____Full-time ____Temporary _____Part-time (days and hours)_____

Date available to begin employment _____

WORK EXPERIENCE:

1. _____
Employer Phone Position Held

_____

From To Ending Salary Immediate Supervisor

_____

Describe Duties

_____

Reason for Leaving

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2. _____

Employer Phone Position Held

_____

From To Ending Salary Immediate Supervisor

_____

Describe Duties

_____

Reason for Leaving

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3. _____

Employer Phone Position Held

_____

From To Ending Salary Immediate Supervisor

_____

Describe Duties

_____

Reason for Leaving

EDUCATION:

High School _____ Years Completed_____ Graduate ___Yes ___No

College _____ Years Completed_____ Degree _____

Other _____

REFERENCES:

1. Name _____ Phone _____ Relationship _____

2. Name _____ Phone _____ Relationship _____

3. Name _____ Phone _____ Relationship _____