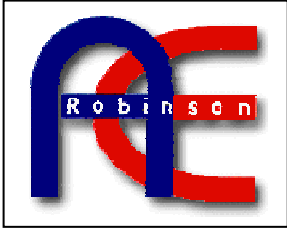


A. E. ROBINSON OIL CO., INC.



1020 West Main Street
Dover-Foxcroft, Maine 04426
(207) 564-8131 or 1-800-640-8131
Fax 564-7265
e-mail: aerob@kynd.net

74 Church Street
Dexter, Maine 04930
Phone 924-5242 or 1-800-295-5242
Fax (207) 924-5211

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Name _____ Date _____ SS# _____
First, Last, Middle Initial

Present Street Address _____
City State Zip

Mailing Address _____

Telephone _____ Cell Phone _____ Emergency Phone _____

EMPLOYMENT DESIRED

Position _____ Date you can start: _____

Are you currently employed? _____

<u>Education</u>	<u>Name & Location of School</u>	<u>Years Attended</u>	<u>Date Graduated</u>
High School	_____	_____	_____
College	_____	_____	_____
Other Experience	_____		

FORMER EMPLOYERS (List below last two employers, last one first)

Date – Month & Year Name & Address Position Reason for leaving

From: _____

To: _____

Date – Month & Year Name & Address Position Reason for leaving

From: _____

To: _____

REFERENCES: (List below three people who are not related to you)

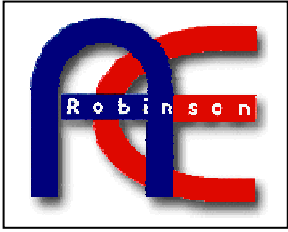
Name Address Phone Years Acquainted

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date: _____ Signature: _____

(Please Review & Complete Background Consent, Part two of this Form)

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BACKGROUND INVESTIGATION CONSENT

I, _____, hereby authorize A.E. Robinson Oil Company, Inc. and/or its agents to make an independent investigation of my background, driving record, criminal records, civil court records, character, past employment, education, medical and or Workman's Compensation claims, including those maintained by both public and private, retail and security organizations and all public records, for the purpose of confirming the information contained on my employment application forms and/or obtaining other information which may be material to my qualifications for employment.

I release A.E. Robinson Oil Company, Inc. and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regards to the information obtained from any and all of the above referenced sources used.

If you decide to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.

I further agree that failure to reveal any prior employment I have had within the past seven (7) years or the giving of any false or misleading information either on my employment application or this form, will be ground for termination of my employment.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

Applicants Name: _____

Full Maiden name or any other name used: _____

Social Security Number: _____ Drivers License Number: _____

Date of Birth: _____ Place of Birth: _____ State: _____

Height: _____ Phone Number: _____

Address: _____

City: _____ County: _____ State: _____ Zip: _____

How long at the above address? Years: _____ Months: _____

Applicant Signature: _____ Date: _____