



Application for Employment

Equal Employment Opportunity – It is our policy to provide equal employment opportunity throughout the Company for all qualified persons without regard to race, color, religion, age, sex, national origin, disability, or veteran status.

Instructions

- Please fill out completely leaving no parts blank. Click on the gray area to fill in information.

Applicant Name (Last, First, Middle)		Are you over 21 years of age?	Social Security Number - -
Present Address (Street, City, State, Zip Code)			Phone Number (Area Code first) - -
Permanent Address (Street, City, State, Zip Code)			Phone Number (Area Code first) - -
Date Available for Employment	Employment Desired	Would you accept temporary employment?	Will you perform shift work?

Position Desired – First Preference	Position Desired – Second Preference
Geographical Location Preferred	Geographical Location Where You Will Not Consider Employment
Will you work overtime?	Are you legally authorized to work in the United States on a regular full-time basis?

Have you been previously employed by DuPont/Conoco/Sentinel Transportation Company? If yes, where _____ when _____									
Do you have relatives currently employed by DuPont/Conoco/Sentinel Transportation Company? If yes, Name: _____ Relationship _____ Department: _____ Location: _____									
If you are presently employed, may we contact your employer for a reference?									
Indicate source, which referred you? Specify:									
Employment Record		Present Employer		Previous Employer 1		Previous Employer 2		Previous Employer 3	
From Mo/Yr	To Mo/Yr								
Employer									
Address									
Supervisors Name and Telephone No. (Area code)		()		()		()		()	
Position(s) Held									
Reason for Leaving									
Identify and explain any time lapses in your referenced employment record. (Include part-time and summer experience)									

Education – Choose Highest Grade Completed	Course of Study Major – Minor	Degree Received	Grade Average		Degree Date
			Overall	Major	
High School Name and Location					
College or University					
College or University					
College or University					
Other:					
1) Include information you believe is important, such as: special training, apprenticeships completed, military experience, other education, or foreign language.					
2) List those machines and/or equipment you are qualified to operate and any other skills you possess.					
3) Titles of theses and special research projects					

Completion of this section is optional.

Sentinel Transportation Company is a government contractor subject to Section 503 of the Rehabilitation Act and Section 402 of the Veterans readjustment Act. As such, we must take affirmative action to employ and advance in employment individuals with disabilities, special disabled veterans, and veterans of the Vietnam era. If you are such an individual and would like to be considered under the affirmative action program, please indicate below.

- I am a special disabled veteran because either (1) I am entitled to compensation under VA law for disability rate at 30% or more, or for disability rated at 10% or 20% for a serious employment disability; or (2) I was discharged or released from active duty because of a service-connected disability.
- I am a veteran of the Vietnam era because part or all of my active military service occurred between 8/5/64 and 5/7/75 and either: (1) was on active duty for more than 180 days and my discharge or release was not dishonorable; or (2) I was discharged or released from active duty because of a service-connected disability.

Submission of this information is voluntary, and disclosure or refusal to provide it will not subject to adverse treatment. This information shall be used only as allowed by law and shall be kept confidential except that (i) supervisors and managers maybe informed about restrictions on work or job duties and necessary accommodations, (ii) first aid or safety personnel may be informed where appropriate in case of an emergency, and (iii) government officials investigating compliance with the law shall be informed.

You may omit references in this section, which you feel might reveal age, race, color, sex, national origin, or disability.

Name and description of scholastic honors received including scholarships.

Name honorary, technical and professional organizations of which you have been a member, or other extracurricular activities in which you have participated, including office held. (List professional licenses held)

This form will usually provide the necessary information. A letter or personal resume may supplement it, however.
PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING

I authorize any third parties, including former employers, schools, law enforcement authorities, and any persons named above, to give to Sentinel any information they may have regarding age and my background, whether or not such information is contained in written records. I hereby release these third parties from all liability for any damage whatsoever for providing information to Sentinel in connection with this application. I also release Sentinel, its agents, their collection and use of information obtained from third parties during the application process. I certify that all information furnished in this application, signed and dated by me this date, is true and complete to the best of my knowledge and belief and that falsification or omission of information requested in this application or in the application process shall be grounds for disqualification from further consideration or for termination.

I understand that if an employment offer is extended, I may be required to undergo a physical examination and/or drug screen test at the expense of Sentinel. I further understand if I do not successfully complete the physical examination or drug screen test, Sentinel may refuse to hire me, and I agree to hold Sentinel harmless for such refusal. I also understand that employment is conditional on my ability to verify my identity and eligibility for employment as required by the Immigration Reform and Control Act of 1986.

I agree and understand that any employment that may be offered to me will not be for any definite period of time and that such employment is subject to termination by me or by Sentinel at any time, with or without cause. I also agree and understand that nothing contained in this application nor any verbal statements made during the application process or during my employment shall be deemed to constitute and employment contract between Sentinel Transportation Company and me.

Signature or Electronic Signature
(Electronic Signature is authorized by you when you enter the last four digits of your Social Security Number)
Electronic Signature

Date:

Post your resume

(Optional but not in lieu of application. Application must be filled out completely.)

Your resume must be in Word format. You can copy and past it into this section.