EMPLOYMENT APPLICATION

(Revised 5-21-12) ☐ Lott Oil Company, Inc. (including dba Shop-A-Lott) Lott Oil Company Affiliates: ☐ Cotton Security Services, LLC ☐ Lott Gaming, Inc. LOMAC of Natchitoches, Inc. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status (PLEASE PRINT) Position (s) Applied for: Date of Application: Advertisement Walk-in Web-site Friend Relative Employment Agency Other Referral Source: Name: ____ FIRST MIDDLE Address: ______ STREET STATE ZIP CODE Telephone: () 2nd Telephone Number or Cell Phone: () AREA CODE Social Security Number: — — — ☐ Yes ☐ No If yes, give date: ____/ / Have you filed an application here before? Have you ever been employed with Lott Oil or one of its subsidiaries? Yes No If yes, give date: / / May we contact your present employer? Yes No Are you employed now? Yes No Are you prevented from lawfully becoming employed Yes No in this country because of Visa or Immigration Status? (Proof of citizenship or immigration status will be required upon employment.) List All Aliases used: ___ On What date would you be available to work? / / Full-Time Part-Time Shift-Work Temporary How are you available to work? Are you on a lay-off and subject to recall? ີ Yes ☐ No ີYes ∏No Can you travel if a job requires it? ПΝο Other than a routine traffic violation, have you been convicted of a felony? Yes (Conviction will not necessarily disqualify applicant from employment.) If yes, please explain

EDUCATION

	Please print name, city & state for each school listed	Did you g (Circle	graduate? e one)	Diploma / Degree
HIGH SCHOOL		Yes	No	
COLLEGE		Yes	No	
OTHER		Yes	No	

SPECIAL SKILLS AND QUALIFICATIONS

List applicable professional or technical licenses or certifications relative to the position for which you are applying.	List equipment, machinery, special skills and qualifications acquired from past employment experience.

CERTIFICATION: Read the following carefully.

As a condition of employment, I hereby voluntarily give my consent to this company and its designated agents to do urinalysis and /or blood testing for alcohol and / or controlled substances. Such testing may occur as a precondition to my being employed, on a random basis during my employment, or any time during my employment with this company when there is reasonable cause to believe that violations of the "Alcohol and Drug Abuse Guidelines" exists. I understand that refusal to submit to such testing will result in my termination.

As a condition of employment, I hereby voluntarily give my consent to this company and its designated agents to submit to a polygraph examination if requested to do so. I understand that refusal to submit to such an examination will result in my termination.

I understand that, if employed, my employment is for no fixed term. My employment may be discontinued, with or without notice, by me or this company, at any time. I understand that no employee, officer or agent of the company may bind it to anything contrary to the above by oral or printed statements, including hand books, benefit booklets, or other forms of communication.

I certify that the information provided by me on this application is correct. I understand that the furnishing of any misleading or incorrect information on this application or its attachments will be just cause for termination should I become employed at this company. I hereby give permission to the persons and companies named on this application and its attachments to provide any pertinent information to this company, or its duly authorized representative except where otherwise indicated. I release said parties from all liability for any damages resulting from issuance of such information.

Applicant Signature:	Date:	/ /	

VOLUNTARY SURVEY

Government agencies at times require periodic reports on the sex, ethnicity, handicapped, veteran and other protected status of applicants. This data is for analysis and possible affirmative action only. SUBMISSION OF INFORMATION IS VOLUNTARY.
Check one: Male Female
Check one of the following: White Black Hispanic
American Indian / Alaskan Native Asian / Pacific Islander
Check if any of the following are applicable: Vietnam Era Veteran Disable Veteran
Handicapped Individual

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include military service assignments.

1.	Past Employer	Job Title	Employment Dates From: To:	
	Telephone Numbers	Supervisor	Wage / Salary	
	() -		Start: Final:	
	Address	Duties and Responsibilities	1	
		Reason for Leaving		
2.	Past Employer	Job Title	Employment Dates From: To:	
	Telephone Numbers	Supervisor	Wage / Salary	
	() -		Start: Final:	
	Address	Duties and Responsibilities	5	
		Reason for Leaving		
3.	Past Employer	Job Title	Employment Dates	
J.	Telephone Numbers	Supervisor	From: To: Wage / Salary	
	() -	Supervisor		
	() -	Duties and Despensibilities	Start: Final:	
	Address	Duties and Responsibilities		
		Reason for Leaving		
1.	Company Contacted Dates of Employment	Person Contacted Position Held	Date of Contact Comment	
	From: To:			
	Would you rehire?	∐ No		
	-		Title:	
	Reference check performed by:		Hue	
2.	Company Contacted	Person Contacted	Date of Contact	
	Dates of Employment From: To:	Position Held	Comment	
	Would you rehire? Yes	No		
	Reason for Leaving:			
		Title:		
3.	Company Contacted	Person Contacted	Date of Contact	
	Dates of Employment From: To:	Position Held	Comment	
	Would you rehire? Yes	No		
	Reason for Leaving:			
Reference check performed by:			-	
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FOR OFFICE USE ONLY: Applicant – do not write below this line.		
□ No position available □ Considered – interviewed Date: With whom: □ Considered – not interviewed Comments:	☐ Not qualified ☐ Offer extended & refused ☐ Hired: First Day to work:	
Job Title: Department: By: NAME AND TITLE		

	Interviewer Name and Comments
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Lott Oil Company 1855 South Drive Natchitoches, LA 71457 Or P.O. Box 17 Natchitoches, LA 71458-0017

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