

APPLICATION FOR EMPLOYMENT

THIS APPLICATION IS GOOD FOR 60 DAYS

FEDERAL LAW OBLIGATES US TO PROVIDE REASONABLE ACCOMMODATION TO THE KNOWN DISABILITIES OF APPLICANTS AND EMPLOYEES, UNLESS TO DO SO WOULD POSE AN UNDUE HARDSHIP. PLEASE FEEL FREE TO LET US KNOW IF YOU NEED AN ACCOMMODATION TO COMPLETE THE APPLICATION PROCESS OR TO PERFORM ANY ESSENTIAL ELEMENTS OF THE POSITION SOUGHT.

Applicants are considered for all positions, and employees are treated equally during employment, without regard to race, color, religion, sex, marital status, national origin, age, disability, or any other prohibited basis of discrimination, as provided under applicable state and federal law.

PLEASE PRINT

Date of ApplicationPosit	tion(s) Applied For:			
Referral Source: Advertisement	Friend Relative	_Walk-In Employment Ag	gencyOther	
Name				
Last		First	Middl	e
Address				
Number	Street	City	State	Zip Code
Telephone	Social Security Nu	mber		
Email Address:				
Have you filed an application here b	efore? Ves	No. If yes give dat	e:	
Have you every been employed here	before?Yes	No If yes, give dat	e:	
Are you employed now?Yes	_No May we	contact your present employ	yer? Yes N	lo
Are you 18 years of age or older?	Yes No Do you	u have a valid F.O.I.D. card? ((IL Residents only)	YesNo
Are you prevented from lawfully bec	coming employed in this	country? YesNo		
If hired, you will be required to submit doo Reform and Control Act of 1986. While yo be prepared to assure us that you can do s	ou need not provide this proof o	of citizenship or immigration status		
On what date would you be availabl	e for work?	Expected Wage:		
Are you available to work: Full-Time	Part-Time Tempo	orary Summer Only \	What Days? S M T	u W Th F S
Are you on lay-off and subject to rec	call?YesN	0		
Have you ever been fired from a job	or asked to resign your	employment? Yes	No	



EDUCATION

Please list education or specialized experience which relates to the position(s) for which you are applying. Exclude names or terms which indicate, for example, race, color, religion, sex, disability or national origin.

School Name	High School	Tech School	College/University
Years completed	9 10 11 12	1234	1234
Diploma/Degree			
Describe Course of Study			

List the machines and/or equipment you can operate:_____

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. Exclude organization names which indicate, for example, race, color, religion, sex, disability, or national origin.

Employer:	Dates Employed		Work Performed
Address:	From	То	
Telephone: ()			
Job Title:			
Supervisor.			
Reason for Leaving:			

Employer.	Dates Employed		Work Performed
Address:	From	То	
Telephone: ()			
Job Title:			
Supervisor.			
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	Outfitting Your Lifesty		
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Address:	From	То	
Telephone: ()			
Job Title:			
Supervisor.			
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Telephone: ()			
Job Title:			
Supervisor.			
Reason for Leaving:			
Employer.	Dates Employed		Work Performed
Address:	From	То	
Telephone: ()			
Job Title:			
Supervisor.			

Reason for Leaving:

If you need additional space, please continue on a separate sheet of paper.

State any additional information you feel may be helpful to us in considering your application.



APPLICANT'S STATEMENT

These answers are true and complete to the best of my knowledge. The Company may investigate all statements contained in this application, and I understand that any false or misleading information provided during the application or interview process will result in my immediate discharge if I am hired, regardless of when discovered. I UNDERSTAND THAT THIS APPLICATION IS NOT A CONTRACT OF EMPLOYMENT. I ALSO UNDERSTAND THAT IF HIRED, REGARDLESS OF ANY ORAL REPRESENTATIONS TO THE CONTRARY, THE EMPLOYMENT RELATIONSHIP BETWEEN MYSELF AND THE COMPANY IS TERMINABLE-AT-WILL SO THAT BOTH THE COMPANY AND I REMAIN FREE TO CHOOSE THE END OUR WORK RELATIONSHIP AT ANY TIME FOR ANY OR NO REASON. ANY CHANGES IN THIS EMPLOYMENT RELATIONSHIP MUST BE MADE IN WRITING AND SIGNED BY THE COMPANY'S PRESIDENT AND/OR CEO.

I also understand that any offer of employment may be condition upon a criminal background check, a credit check and/or a check of my prior employment history and employment references, in accordance with the provisions of the Fair Credit Reporting Act, as it may be amended from time to time.

Additionally, I authorize the Company to supply my employment record, in its sold discretion, in whole or in part, to any prospective employer, government agency, or other party, with an interest that the Company deem appropriate.

Signature of Applicant _____

_ Date _____