



## Employment Application

Central Farmers Cooperative considers all interested persons for employment without regards to the persons' race, color, creed, religion, sex, ancestry, disability or national origin. Each question must be completely answered. A resume may be submitted, but persons interested in Central Farmers Cooperative positions will only be considered if an application is also completed.

Date \_\_\_\_\_

### Position that you are applying for

\_\_\_\_\_

### I. PERSONAL INFORMATION

\_\_\_\_\_  
Last Name                                      First Name                                      Middle

### Current Address

\_\_\_\_\_  
No. and Street                                      City                                      State                                      Zip

(\_\_\_\_\_) \_\_\_\_\_                                      (\_\_\_\_\_) \_\_\_\_\_  
Home Phone Number                                      Cell Phone Number

When is the best time to contact you? \_\_\_\_\_

Are you at least 18 years old?       Yes       No  
(If hired, you may be required to submit proof of age.)

Have you ever applied to or worked for this company?     Yes     No  
If yes, when? \_\_\_\_\_

When will you be available to begin work? \_\_\_\_\_

Will you be able to work overtime if asked?     Yes     No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?     Yes     No

Have you ever been convicted of a felony or serious misdemeanor?     Yes     No

If yes, state nature of the offense, when and where convicted and disposition of the case.

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(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances and the relevance of the offense to the position for which you are applying will be considered in the hiring decision.)

## II. EDUCATION, TRAINING AND EXPERIENCE

School	Name of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Business/Trade/ Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Specify)				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Please describe any special education and/or experience relating to position.

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Why are you applying for work at Central Farmers?

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Why do you feel you are best qualified for this position?

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### III. EMPLOYMENT HISTORY

Give employment records as completely as possible, starting with your present or last employer.

**Name of Employer:** \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Dates of Employment: from \_\_\_\_\_ to \_\_\_\_\_ Salary/Rate of Pay: \_\_\_\_\_

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact employer as a reference? \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Dates of Employment: from \_\_\_\_\_ to \_\_\_\_\_ Salary/Rate of Pay: \_\_\_\_\_

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact employer as a reference? \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Address: \_\_\_\_\_

Type of business: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Dates of Employment: from \_\_\_\_\_ to \_\_\_\_\_ Salary/Rate of Pay: \_\_\_\_\_

Your position and duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact employer as a reference? \_\_\_\_\_

Attach additional pages, if necessary.

#### IV. REFERENCES

Identify three persons, not related to you, who know about your work performance within the last three years.

Name: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

Address

Name: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

Address

Name: \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Telephone Number

Address

**Please read carefully, initial each paragraph and sign on the last line**

\_\_\_\_\_ I hereby certify that the answers I have provided in this Employment Application are true and correct to the best of my knowledge. I further certify that I have personally completed this Application. I understand that any omission or misstatement of material fact on this Application or on any document used to secure employment shall be grounds for rejection of this Application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize Central Farmers Cooperative to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the Company any and all letters, reports and other information related to my work records. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that if offered a position with Central Farmers, I may be required to submit to a pre-employment drug and alcohol test. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of this exam may result in the withdrawal of any employment offer or termination of employment if already employed.

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract for a term of employment between me and Central Farmers Cooperative. I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed