

Application of Employment Agricultural Consulting Services

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Name:	Last	First
		Middle Initial
Address:		Telephone: Email Address:

Yes No

- Have you ever been employed by this organization?
- Do you have any objection to working overtime?
- Are you able to meet the attendance requirements?
- Can you submit proof of legal employment authorization and identity?
- If you are under 18, can you furnish a work permit if it is required?
- Can you travel if required by this position?
- Do you possess a valid driver's license? Driver's license number: _____
- Have you been convicted of a felony in the last 7 years?

If yes, please explain. (A conviction will not automatically bar employment): _____

How did you learn about this job? _____

Education History	Name & Location	Degree
High School		
College		
Technical Training		
Other		

Employment History (most current first)		
Employer:	Job Title:	
Address:	Duties:	
Phone:	Reason for leaving:	
Date started:	Left:	Salary:
Employer:	Job Title:	
Address:	Duties:	
Phone:	Reason for leaving:	
Date started:	Left:	Salary:

Employment History (continued)		
Employer:	Job Title:	
Address:	Duties:	
Phone:	Reason for leaving:	
Date started:	Left:	Salary:
Employer:	Job Title:	
Address:	Duties:	
Phone:	Reason for leaving:	
Date started:	Left:	Salary:

References (2 Professional and 2 Personal)		
Name	Address	Phone Number
1.		
2.		
1.		
2.		

Other

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

The Agricultural Consulting Services is a smoke-free working environment. No smoking is permitted in the building.

I understand that Agricultural Consulting Services follows an employee-at-will policy, in that the employer or I may terminate my employment at anytime, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed I must be lawfully authorized to work in the United States, and I must show Agricultural Consulting Services documents that will prove this.

I understand that Agricultural Consulting Services thoroughly investigate my work and personal history and verify all data given on this application, on related paper and in interviews. I authorize all individuals, schools, and firms therein, except my current employer, if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Applicant Signature: _____ Date: _____