

APPLICATION FOR EMPLOYMENT

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; all applicants must be over age 18 to for consideration.

Date of Application: _____ Position Applying For: _____ Name: _____ Street Address: _____ City, State, Zip: _____ Home Phone: _____ Cell Phone: _____ SSN#: _____ Will you work overtime if asked?: _____	Cogdill Farm Supply, Inc. 108 N 6th ST. Dunlap, IA 51529 712-643-5360 (office) 712-643-2310 (fax) rob.cogdill@gmail.com U.S. Citizen?: _____ Pay Expected: _____ Full-Time or Part-Time: _____ Legally eligible to work in US?: _____ When can you start?: _____
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Education and Training

School Name, Major and Location	Years Completed	Did you Graduate?
Computer Skills? Please Describe:		

Personal References

Provide name, address and telephone number of three references who are not related to you:
1.)
2.)
3.)

Special Skills and Qualifications

List any special job-related skills and qualifications (examples: licenses, certifications, trades):

Military Service

Did you serve in the armed forces?	What branch?
Are you a veteran of a foreign war (please describe)?	
Are you enlisted in the military reserves?	
Describe any military duty or training you received which may be relevant to this job:	

Employment Experience

List all work experience, paid or unpaid, relevant to the position for which you are applying (list most recent work experience first). Account for any periods of unemployment. Attach additional copies of this sheet if necessary, or a complete resume/CV which contains all of the information requested below. Please note if there are any reference we may not contact.

Employer:	Start Date:	Date Left:
Job Title:	Location:	
Supervisor:	Phone Number:	
May we contact this employer?	Starting Weekly Pay:	Final Pay:
Duties:		
Reason for Leaving:		
Employer:	Start Date:	Date Left:
Job Title:	Location:	
Supervisor:	Phone Number:	
May we contact this employer?	Starting Weekly Pay:	Final Pay:
Duties:		
Reason for Leaving:		
Employer:	Start Date:	Date Left:
Job Title:	Location:	
Supervisor:	Phone Number:	
May we contact this employer?	Starting Weekly Pay:	Final Pay:
Duties:		
Reason for Leaving:		
Employer:	Start Date:	Date Left:
Job Title:	Location:	
Supervisor:	Phone Number:	
May we contact this employer?	Starting Weekly Pay:	Final Pay:
Duties:		
Reason for Leaving:		

Miscellaneous

Have you been convicted of a crime in the past 10 years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? If "Yes," describe in full:	
How long at present address?:	Do you own or rent?:
How long at previous address?:	Marital Status:
Number of dependents, including yourself:	
State names of relatives and friends who are, or have previously worked for us:	

The information provided in this Application for Employment is true, correct and complete. If you employ me, any misstatement or omission of fact on this application may result in my dismissal. I understand that acceptance of an offer of employment creates no obligation upon you, the employer, to continue to employ me in the future.

Signature: _____

Date: _____