APPLICATION FOR EMPLOYMENT

Today's Date _____

APPLICANT NAME





DATE _____

APPLICANT NOTE: This Employment Application is intended for use in evaluating your qualifications for employment. It is not an employment contract. Please answer all questions completely and to the best of your ability. False or misleading statements are grounds for refusal or termination of employment and benefits. It is the policy of this company as an Equal Opportunity Employer to ensure that there shall be no discrimination against any employee or applicant for employment on the basis of age, race, color, creed, marital status, religion, sex, national origin, disability or veteran status, or any other status protected by law.

COMPLETE ALL QUESTIONS; PLEASE PRINT CAREFULLY.										
PERSONAL DATA NAME (Last)	First	First			Middle		Preferred Name			
LIST ANY OTHER NAMES used in past 7 years.										
HOME ADDRESS (Number & Street)				City	City		State	ZIP		
Primary Phone (with area code)	Alternate Phon			(with area code)		?)	Email address			
Years At Current Address.	If less than 7 years, list all other cities and states in which you lived during the past 7 years.									
EMAIL ADDRESS:	Are you legally eligible for employment in this country? Yes No (Proof of eligibility will be required upon employment.)									
Other than minor traffic offenses, have you ever been convicted of a crime? Yes IF YES, describe in detail below										
(A conviction record will not necessarily	bar you from e	mploy	ment.)		∐ No	includi	ng date and lo	ocation of offense.		
As a part of the background information that you provide on this application, you are not required to provide, and you shall not voluntarily provide, the company with any information regarding any conviction/arrest records pertaining to you that have been sealed or expunged.										
Have you ever applied here previously? Yes No Are you 18 years of age or older? If yes, what year? Yes No										
Have you ever been employed by Homestead Family Farm, previously? Yes NO IF YES, complete next three questions. Starting and Ending Dates of Employment										
Position(s) Held				-	Reason for Leaving					
Do you have any relatives presently employed here? Yes No IF YES, complete information below.										
Name	Relation				Job Title		Location			
POSITION										
Position Desired	Salary Expected					What Date Are You Available?				
	\$ Month									
Are you willing to travel? Yes No IF YES, any restrictions?				Work Availability ☐ Full Time ☐ Part Time ☐ Shift Work						
Are you willing to relocate?					May we contact your current employer for verification? Yes No N/A					
						1				

EMPLOYMENT HISTORY

DIVIT DO INIDI	1 11151 5101									
PRESENT OR LAST	Company Name	Stree	Street Address		From (month/		(year)	To (month/year)		
EMPLOYER	City & State Where Located	Phor	ne No. (with area	(with area code) Typ			ess	Ending Salary		
May we contact for a	Position Title	Reas	Reason for Leaving				Are you	es No		
reference? □Yes □ No	Name of Supervisor	Title	Title of Supervisor				Supervisor's Phone No.			
2ND	Company Name	Stree	Street Address				year)	To (month/year)		
PREVIOUS EMPLOYER	City & State Where Located	Phor	Phone No. (with area code) Typ				ess	Ending Salary		
May we contact for a	Position Title	Reas	Reason for Leaving				Are you eligible for reh			
reference? □Yes □ No	Name of Supervisor	Title	Title of Supervisor				Supervisor's Phone No.			
3RD PREVIOUS	Company Name	Stree	Street Address Fr			onth/	(year)	To (month/year)		
EMPLOYER	City & State Where Located	Phor	Phone No. (with area code) Ty _I				ess	Ending Salary		
May we contact for a	Position Title	Reas	Reason for Leaving				Are you	es No		
reference? □Yes □ No	Name of Supervisor	Title	Title of Supervisor				sor's Vo.			
4TH PREVIOUS	Company Name	Stree	Street Address			rom (month/year)		To (month/year)		
EMPLOYER	City & State Where Located	Phor	Phone No. (with area code) Ty			Type of Business		Ending Salary		
May we contact for a	Position Title	Reas	Reason for Leaving				Are you	eligible for rehire?		
reference? □Yes □ No	Name of Supervisor	Title	Title of Supervisor				Supervisor's Phone No.			
5TH PREVIOUS	Company Name	Stree	et Address	From (month.		year)	To (month/year)			
EMPLOYER	City & State Where Located	Phor	ne No. (with area	code)	Type of Business			Ending Salary		
May we contact for a	Position Title	Reas	on for Leaving			Are you	es No			
reference? □Yes □ No	Name of Supervisor	Title	Title of Supervisor			Supervisor's Phone No.				
MILLEADY CE	DVICE (Complete if the land	. 1 1 4 1	IIC MULL.		DD214		1 1.	. 1 C		
Branch	RVICE (Complete if you have served Final Base, City & State where a		Date Entered		ischarged	_		osition at Discharge		
Name and Title of Supervisor				Phone No.(with area code)						
List service scho	ols or special relevant experience.			ı						
APPLICANT N	JAME			_	DAT	E				

EDUCATION	\ \	received under a different	name, please	include.)				
	Nai	me of School -	Degre	e	Year	Date	es of	Major & Minor
School	Street Ac	ldress, City & State	Receive	ed R	eceived	Atteno	lance	Fields of Study
High School		·						
O								
College								
conege								
Other,								
including								
GED								
ADDITIONAL	OHALIEICAT	IONG						
	QUALIFICAT			:1 1:	-4-46:		1	14-
Projessionai iic	enses, registratio	ns or certifications currer	ntiy neia. List,	inciuaing	state of iss	ruance an	а ехрігано	on aate.
т .	1 . 1 . 7							
Languages in w	nich you are flue	nt other than English.						
List additional	relevant skills or	abilities.						
PROFESSION	AL REFERENCE	CES (List individuals fam	niliar with you	r work; do	not includ	le relative	es.)	
Name		City & State	Pho	ne (Prefer	rably Day	Time)	Occupation	on
		-						
I certify that I have read and understand the "Applicant Note" on Page One of this application and that the answers given by me to the								
foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that								
any false information, omission or misrepresentations of the facts called for in this application may result in rejection of my								
application or discharge at any time during my employment.								
I authorize the company and/or its agents including consumer-reporting companies to verify any of this information. I authorize all								
persons, schools, companies, law enforcement agencies, and consumer reporting bureaus to release any and all information regarding								
my background. I release all parties from any liability for damage that may result from furnishing this information to you.								
By my signature on this application, I acknowledge that the company did not inquire about and I did not provide any information								
regarding conviction/arrest records that have been sealed or expunged.								
						DATE		
APPLICANT'S S	SIGNATURE							