

Associated FEED & SUPPLY CO.

APPLICATION FOR EMPLOYMENT

Corporate Mailing Address:

PO Box 2367
Turlock, Ca 95381
(209) 667-2708

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

PLEASE PRINT LEGIBLY AND FILL OUT COMPLETELY

Application Date:

Position(s) Applying For:	Month	Day	Year
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1. Personal Information

Last Name:	First Name:	Middle Initial:	Home Phone:
Street Address	City	State	Zip Code
			Cell or Message Phone:

2. Preliminary Information

Best time to contact you:	If you are under 18 years of age, can you provide required proof of your eligibility to work?		
Have you ever filed an application with us before?	If Yes, give date:	What position:	
Have you ever been employed by us before?	If Yes, give date:	What position:	
Do you have any relatives who work here? (If so please list below)	The Company may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.		
Name/Relationship:	Name/Relationship:	Name/Relationship:	
Can you, after employment, submit verification or your legal right to work in the United States? (Proof of citizenship or immigration status will be required upon employment.)			
The information requested below is necessary for the specific position for which you are applying. No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the surrounding circumstances and the relevance of the offense to the position applied for may, however, be considered. (Any information regarding criminal history will be maintained confidentially.)			
Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? (If yes, state the nature of the crime(s), when and where you were convicted, and the disposition of the case below.)		(Misdemeanor convictions for marijuana-related offenses that are more than two years old and convictions that have been judicially dismissed or ordered sealed pursuant to law need not be listed.)	
Crime/Charge:	When/Where Convicted:	Disposition of the case:	
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3. Education

	Name of School	Course of Study	Number of Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

We are an Equal Opportunity Employer

4. Availability Information

Are you currently employed?	May we contact your present employer?	Are you currently on "Lay-Off" status/subject to recall?
Can you travel if a job requires it?	What is your desired salary range?	
Date available for work:	Are you available to work:	If Full Time, please indicate which shift(s):
		If Part Time, please indicate times you are available
		If Temporary, please indicate dates available: _____ to _____

5. Employment Experience

Please list your prior work experience. Start with your current employment information or the last job you held. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.)	Employer:	Dates Employed		Work Performed:
		From	To	
	Address:			
	Telephone No.:	Hourly Rate/Salary		
		Starting	Final	
	Position:	Supervisor:		
	Reason for Leaving:			
2.)	Employer:	Dates Employed		Work Performed:
		From	To	
	Address:			
	Telephone No.:	Hourly Rate/Salary		
		Starting	Final	
	Position:	Supervisor:		
	Reason for Leaving:			
3.)	Employer:	Dates Employed		Work Performed:
		From	To	
	Address:			
	Telephone No.:	Hourly Rate/Salary		
		Starting	Final	
	Position:	Supervisor:		
	Reason for Leaving:			
4.)	Employer:	Dates Employed		Work Performed:
		From	To	
	Address:			
	Telephone No.:	Hourly Rate/Salary		
		Starting	Final	
	Position:	Supervisor:		
	Reason for Leaving:			

6. Training and Skills

Describe any specialized training, certifications, apprenticeships, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

Summarize special job-related skills and qualifications acquired from employment or other experiences.

7. Specialized Skills

Computer Skills

Place a check mark next to the skill you have and list the product(s) you have experience using.

Vehicle/Equipment Operation

List all equipment you are licensed or certified to operate.

Machinery Operation

List all machinery you have experience operating as it relates to this position.

Email	<input type="checkbox"/>			
Word Processing	<input type="checkbox"/>			
Spreadsheet	<input type="checkbox"/>			
Datatbase	<input type="checkbox"/>			
Accounting	<input type="checkbox"/>			
Other	<input type="checkbox"/>			

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

8. ADA Declaration

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

<p><i>Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation?</i></p>	
<p>_____ YES</p>	<p>_____ NO</p>

9. Professional References

Please provide 3 references from individuals who are not related to you but have direct knowledge of your work performance.

1.)	_____ Name	_____ Address	_____ Contact Number
	_____ Relationship	_____ Address	
2.)	_____ Name	_____ Address	_____ Contact Number
	_____ Relationship	_____ Address	
3.)	_____ Name	_____ Address	_____ Contact Number
	_____ Relationship	_____ Address	

10. Applicant Statement *(Please read carefully and completely.)*

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

FOR HUMAN RESOURCE DEPARTMENT USE ONLY

Arrange an interview? If Yes, Date: _____ Time: _____

Interviewer: _____

Comments: _____

Referred By: _____

Employment Decision: If Yes, Date: _____ Hirer: _____

Job Title: _____ Dept.: _____

Hourly Rate/Salary: _____