

Submit application to:

EMPLOYMENT APPLICATION

Lime Springs Beef an equal opportunity employer and will not discriminate in the hiring process on the basis of sex, religion, race, color or national origin, disability, or age.

Name _____		Social Security # _____	
Last	First	Middle	
Address _____			
Home Phone _____	Street _____	City _____	State _____ Zip _____
Business/Cell Phone _____		E-Mail Address _____	
Position(s) applied for _____		Date of Application _____	

Referral Source Walk-In Employee Advertisement Company Website Other

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever applied at Lime Spring Beef before?
(If yes, give dates and position) Yes No

Have you ever been employed by Lime Spring Beef before?
(If yes, give dates, position and reason for leaving) Yes No

Do you have any relatives who are currently employees of Lime Spring Beef? Yes No

Name(s) and Relationship _____

Are you currently employed? Yes No

Date available to work _____ Are you legally eligible for employment in this country? Yes No

What is your desired salary range or hourly pay rate? \$ _____ Per _____

Applying for: Full Time Part-Time Temporary

Have you ever been convicted of a misdemeanor or felony? (For the purposes of this question, "convicted" includes found guilty, plead guilty, plead no contest, or been given a deferred sentence or judgment.) Yes No

(If yes, please provide dates and details)

Note: A conviction record will not necessarily disqualify an applicant from employment. Factors such as date of offense, seriousness/nature of the offense and position applied for will be taken into account.

EMPLOYMENT HISTORY

Starting with your most recent employer, please provide the following information:

Employer	Address	Telephone Number
()		
From: _____ To: _____	Starting Salary: _____	Ending Salary: _____
Starting Position: _____		Ending Position: _____
Name and Title of Supervisor: _____		Ending Position: _____
Description of Duties: _____		
Reason For Leaving: _____		

Employer	Address	Telephone Number
()		
From: _____ To: _____	Starting Salary: _____	Ending Salary: _____
Starting Position: _____		Ending Position: _____
Name and Title of Supervisor: _____		Ending Position: _____
Description of Duties: _____		
Reason For Leaving: _____		

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()		
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Employer	Address	Telephone Number
()		
From: _____ To: _____	Starting Salary: _____	Ending Salary: _____
Starting Position: _____		Ending Position: _____
Name and Title of Supervisor: _____		Ending Position: _____
Description of Duties: _____		
Reason For Leaving: _____		

EMPLOYMENT HISTORY (CONTINUED)

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

Have you ever been fired or asked to resign from a job?

Yes No

(if yes, please explain)

EDUCATION AND TRAINING

School	Name and Location of School	Course of Study	# of Years Completed	Did you graduate?	Degree or Diploma
High School or GED					
College					
Other					

PROFESSIONAL LICENSES AND/OR CERTIFICATIONS

Type	License/Certificate #	State Issued

SKILLS AND QUALIFICATIONS

Summarize any special training, skills or professional affiliations that may assist you in performing the position for which you are applying.

RELATED INFORMATION

List special accomplishments, publication, awards, etc.

Summarize special job-related skills and qualifications acquired from employment or other experience?

REFERENCES

List name and telephone of three business/work references who are *not* related to you.

Name	Title	Relationship to You	Telephone #	# of Years Known

APPLICANT STATEMENT

I certify that all the information submitted by me on this application is true and complete and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed, my employment may be terminated whenever it is discovered. I understand that completing this application does not constitute an offer of employment and that my application may be rejected for any reason.

In consideration of my employment, I agree to conform to Lime Spring Beef's rules and regulations and I agree that this organization follows an "employment at will" policy that an individual who is hired may voluntarily leave employment and may be terminated by the employer at any time and for any reason. I also understand and agree that the terms and condition of my employment may be changed with or without cause and with or without notice at any time by Lime Spring Beef I understand that this employment application and any other employee-related documents are not contracts of employment.

I expressly authorize without reservation, Lime Spring Beef, its representatives, employees or agents to contact and obtain information for all references, employers, public agencies, licensing authorities and education institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the Applicant Statement.

Signature of Applicant _____

Date _____

AFFIRMATIVE ACTION VOLUNTARY INFORMATION

The Lime Spring Beef is an Equal Opportunity Employer. We will consider all applicants for positions without regard to sex, religion, race, color, national origin, disability or age. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of unlawful criteria.

In an effort to comply with requirements regarding government reporting and other legal obligations which may apply, we request that you complete this form. Your cooperation in providing the data is appreciated.

THIS FORM MAY BE COMPLETED BY THE APPLICANT ON A VOLUNTARY BASIS. THE INFORMATION PROVIDED WILL NOT BE USED FOR MAKING ANY EMPLOYMENT DECISION AND IT WILL BE FILED SEPARATELY FROM YOUR EMPLOYMENT APPLICATION AND KEPT CONFIDENTIAL IN ACCORDANCE WITH APPLICABLE LAWS AND REGULATIONS.

Position(s) you are applying for _____

Referral Source

- Walk-In Iowa Workforce Development Anderson Erickson Dairy Web Site
 Employee Relative / Friend Newspaper Advertisement—Source _____
 Other—please specify _____

Name _____ Telephone # _____

APPLICATION INFORMATION

Address _____

Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- American Indian / Alaskan Native Black Hispanic / Latino
 Asian White Other Pacific Islander

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Position(s) applied for Available Not Available

Other positions considered for _____

Hired Yes No

Position hired for _____ Date of Hire _____

From the EEO job classifications listed below, which one best describes the position filled?

- Director / Manager Professional Technical
 Sales Office / Clerical Craft / Skilled
 Operative / Semi-skilled Labor / Unskilled Service Worker

Completed by _____ Date _____