

EMPLOYMENT APPLICATION

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability, pregnancy, national origin, genetics, citizenship, and marital or veteran status.



APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address					
City			State	Zip	
Phone ()			E-mail Address		
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
Are you 18 years of age or older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Are you legally authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
EDUCATION					
High School			Address		
Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College			Address		
Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other			Address		
Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
REFERENCES					
<i>Please list three professional references.</i>					
Name			Company		
Address			Phone ()		
Name			Company		
Address			Phone ()		
Name			Company		
Address			Phone ()		
CERTIFICATES/LICENSES/ADDITIONAL SKILLS					
Certificates					
Driver's License #		State of Issue		CDL	YES <input type="checkbox"/>
					NO <input type="checkbox"/>
Endorsements					
Additional Skills					

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I authorize Full Circle Ag to obtain information about me from previous employers, educational facilities and other parties to verify the accuracy of information in this application.

We want to provide a reasonable accommodation to the known disabilities of applicants and employees, unless to do so would pose an undue hardship. Please feel free to let us know if you need an accommodation to complete the application process or to perform any essential elements of the position sought.

I understand that filling out this form does not indicate there is a position open and does not obligate Full Circle Ag to hire. This application will expire in 30 days. Unless otherwise notified, I understand that my status as an applicant will end and that I will have to reapply for employment in the future by completing a new application.

If this application leads to employment, I understand that false or misleading information in my application or during an interview may result in immediate dismissal no matter when the information is discovered. I understand and agree that nothing contained in this application or an interview is intended to create an employment contract and that if employed, I will be employed at will.

I accept all terms and conditions in the above statement.

Signature	Date
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