

WORK EXPERIENCE: Please list the most recent employment first.

Employer _____
Name Address

Job title Duties

Immediate supervisor _____ Phone number _____

Salary \$ _____

Are you now employed there? _____ May we contact them? _____

If not, state why _____

Dates of employment: from _____ to _____

Employer _____
Name Address

Job title Duties

Immediate supervisor _____ Phone number _____

Salary \$ _____

Are you now employed there? _____ May we contact them? _____

If not, state why _____

Dates of employment: from _____ to _____

Employer _____
Name Address

Job title Duties

Immediate supervisor _____ Phone number _____

Salary \$ _____

Are you now employed there? _____ May we contact them? _____

If not, state why _____

Dates of employment: from _____ to _____

(Attach additional sheets if needed)

LIST SPECIAL SKILLS, QUALIFICATIONS, OR ACCOMPLISHMENTS RELATED TO POSITION YOU ARE APPLYING FOR *(Include skills with computers, other machinery, public speaking, writing, patents, publications, etc.)*

LIST ANY PROFESSIONAL SOCIETY MEMBERSHIPS

LIST CURRENT LICENSES AND CERTIFICATES *(include issuing state and expiration date)*

DO YOU HAVE A VALID STATE DRIVER'S LICENSE?	IF YES, HAS YOUR LICENSE EVER BEEN SUSPENDED OR REVOKED?	IF YES, PLEASE EXPLAIN
<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	

GIVE NUMBER OF MOVING TRAFFICE VIOLATIONS YOU HAVE HAD OVER THE PAST THREE (3) YEARS

GIVE NUMBER OF TRAFFIC ACCIDENTS YOU HAVE HAD IN THE PAST THREE (3) YEARS

HAVE YOU EVER BEEN CONFLICTED OF A CRIMINAL OFFENSE? YES NO
ARE YOU CURRENTLY OUT ON BAIL OR ON YOUR OWN RECOGNIZANCE PENDING TRIAL?
 YES NO

HAVE YOU EVER BEEN CONVICTED OF DRIVING UNDER THE INFLUENCE OF ALCOHOL OR DRUGS? YES NO

(If your answer is yes to any of these questions please explain on a separate sheet of paper reporting all cases and dates except minor traffic violations, sealed, or juvenile convictions.)

REFERENCES:

List name, address and phone number of three references and years known (no relatives):

1. _____
2. _____
3. _____

List agriculture experience _____

Other related experience _____

How did you learn of this position? _____

PHYSICAL RECORD:

List any physical concerns: Hearing _____ Speech _____ Vision _____

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. I certify that all statements made within this document are true to the best of my knowledge.

Signature _____ Date _____