
LaGrander's Hillside Dairy, Inc.

W11299 Broek Road

Stanley, WI 54768

Phone: (715) 644-2275 Fax: (715) 644-0720

APPLICATION FOR EMPLOYMENT

PLEASE PRINT OR TYPE:

NAME: _____

FIRST

MIDDLE

LAST

ADDRESS: _____

(NUMBER)

(STREET)

(CITY, STATE)

(ZIP CODE)

PHONE NUMBER: _____ BEST TIME TO CALL? _____

SOCIAL SECURITY NUMBER: _____

Are you over the age of 18? _____ Over the age of 16? _____

Are you a citizen of the United States? _____

If not, are you legally eligible for employment in the United States? _____

(Proof of U.S. Citizenship or Immigration status will be required upon employment)

POSITION(S) APPLYING FOR: _____

If applying for a job that requires lifting are you physically capable of lifting

Up to 50 lbs? _____ Yes _____ No Up to 100 lbs? _____ Yes _____ No

DATE AVAILABLE: _____ SALARY/WAGE EXPECTED: _____

Type of employment applying for: _____ Full-time _____ Part-time _____ Seasonal

How did you hear about LaGrander's Hillside Dairy?

Friend: _____ Relative: _____ Newspaper Ad: _____ Internet: _____ Other: _____

Do you have any relatives presently working for us? _____

If so, name and department? _____

Were you previously employed by us? _____ If yes, when? _____

Please list two persons well acquainted with you during the past few years and **NOT** related to you.

Name	Phone Number	Relationship	Years Known
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EMPLOYEMENT RECORD

Starting with PRESENT or MOST RECENT, list all previous employers. Include self-employment, summer and part-time jobs.

If you are now employed, may we contact your present employer: _____ Yes _____ No

1. Company Name: _____ Date Employed From: _____ To: _____

Address: _____ Telephone: _____

Job Title: (Describe what you did and equipment used): _____

_____ Ending Wage: _____

Supervisor: _____ Reason for leaving: _____

2. Company Name: _____ Date Employed From: _____ To: _____

Address: _____ Telephone: _____

Job Title: (Describe what you did and equipment used): _____

_____ Ending Wage: _____

Supervisor: _____ Reason for leaving: _____

3. Company Name: _____ Date Employed From: _____ To: _____

Address: _____ Telephone: _____

Job Title: (Describe what you did and equipment used): _____

_____ Ending Wage: _____

Supervisor: _____ Reason for leaving: _____

HAVE YOU EVER BEEN DISCHARGED FROM A PREVIOUS EMPLOYER: (EXPLAIN)

EDUCATION

	NAME/ADDRESS	MAJOR	NO. OF YEARS COMPLETED
HIGH SCHOOL			
COLLEGE			
OTHER			

Have you ever been convicted of a crime? _____ No _____ Yes

If yes, explain: _____

PLEASE READ AND SIGN BEFORE TURNING IN APPLICATION

LaGrander's Hillside Dairy is an equal opportunity employer. We do not discriminate in employment practices or opportunities. Interviews are given on a competitive basis, using job-related factors, after a written application has been received and reviewed. Because of the large number of applications received, not everyone who applies for a position will be interviewed.

I understand that an omission or falsification of information in this application or other documents submitted in support of this application may result in rejection of this application, removal from an eligibility list, or dismissal from employment. I further understand that any misrepresentation or material omission of this application will result in my being eliminated from further consideration. I agree that if accepted for employment, any misrepresentation or material omission which becomes known to LaGrander's will result in immediate termination of my employment.

I understand that nothing contained in this employment application or in the granting of an interview or in any policies, procedures or handbooks that I might receive is intended to create an employment contract between the Company and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing and signed by an authorized representative of the Company. If an employment relationship is established, I agree to conform to the instructions, rules and policies of LaGrander's Hillside Dairy. I understand that I have the right to terminate my employment with or without notice at any time, for any reason, and the Company retains a similar right regarding the discontinuation of my employment. The Company also reserves the right to change or discontinue benefits at any time.

I agree that all statements made in this application (except contacts with my present employer, unless otherwise authorized) may be investigated prior to and/or during my employment. I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably.

SIGNATURE

DATE