



# Application for Employment

## Mount Joy Farmers Cooperative Association

Position You Are Applying For \_\_\_\_\_

Desired Salary \_\_\_\_\_

Date Available for Work: \_\_\_\_\_

### PERSONAL INFORMATION

Last Name		First Name		Middle	
Address		City		State	Zip
Home Phone: _____		Cell Phone: _____		Email address: _____	
Social Security Number: _____					
Are you a U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No					

### EDUCATION

School Name	Location	Years Attended	Degree Received	Major

Other training, certifications or licenses held: \_\_\_\_\_

### EMPLOYMENT

Employer: _____	Dates Employed: _____
Work Phone: _____	Pay Rate: \$ _____ to _____
Address: _____	
City: _____	State: _____ Zip: _____
Position: _____	
Duties Performed: _____	
Supervisors Name and Title: _____	
Reason for leaving: _____	
May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	

### REFERENCES

Name	Title	Company	Phone

### Acknowledgement and Authorization

- ☐ I certify that all answers given herein are true and complete to the best of my knowledge.
- ☐ I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.
- ☐ In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_