

# Out Post Farm

## General Application

### Name

Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Birth Date \_\_\_\_\_ Telephone \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Are you looking for full-time employment? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, what hours are you available? \_\_\_\_\_

Are you willing/flexible to work weekend/holiday shifts? Yes \_\_\_\_ No \_\_\_\_

### Education

High School \_\_\_\_\_

College \_\_\_\_\_

### Other Training

Are there any activities or conflicts that will affect your work schedule? (Please list below)

Activity Time \_\_\_\_\_

Activity \_\_\_\_\_ Time \_\_\_\_\_

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

### Employment History

**Company Name 1** \_\_\_\_\_

Address \_\_\_\_\_

Date Started

Date Ended

Responsibilities

Reason for leaving

**Company Name 2**

Address

Date Started

Date Ended\_\_

Responsibilities

Reason for leaving

**REFERENCES**

Please list two references (business and/or personal)

Reference 1

Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

Reference 2

Name \_\_\_\_\_ Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Email \_\_\_\_\_

Why do you want to work at Out Post Farm?

What Qualities/Characteristics do you possess that would help?

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either for this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature \_\_\_\_\_

Date \_\_\_\_\_