

Sauder Feeds, Inc.

Employment Application MANUFACTURING / PRODUCTION / MILL POSITIONS

Personal li	nformation			Date o	of Application	_//
Full name:		_		S.S.N.		
	Last	First	M.I.			
Address:				Phone:		
	Street address		Apt/Unit #			
				Email:		
	City	State	Zip Code			
Driver's License No.				Best way to reach you:		
	Driver's Licens	e Number State	Expiration Date		□ PHOHE - AITEHIO	oon ∟Emait-Anytime
Start Date you	would be available:			Desire	ed Pay: \$	
Work Schedule	e You Desire:	☐ Full-time – 1 st Shift	☐ Full-time – 2	^{2nd} Shift	☐ Full-time – 3 rd Shift	
		☐ Part-time	\square Seasonal		□Temporary	
Position applie	ed for:					
A		(Manufacturing/Production, CDL Drive		_		
Are you able to	meet the attendance re	quirements of this position?	Yes □	No □ır	need more information about t	he attendance requirements
Will you work o	overtime if required?	☐ Yes ☐ No ☐ 0	On Occasion			
How did you he	ear about us?					
a.a yea		-				
If you are unde	er 18 years old, can you p	provide a work permit if requ	ired? Yes	□ No		
Are you legally	eligible for employment	in the United States?	☐ Yes	□ No		
(If yes, proof is	required if hired.)					
		unctions" of the job for which	ch you 🗆 Yes	□ No □	☐ I need more informati	
Note: This question is no the existence of a disabili	ty, particular accommodation, or whether acc	② accommodation)'? Discant's disability. Please do not provide informate to modation is necessary. These issues may be			the job's "essential fu	nctions"
at a later stage, to the ext	ent permitted by law.					
Have you ever	r been employed here?		☐ Yes	□ No	If yes, when?	
Have you ever	been convicted of a felor	ny?	□ Yes	□ No		
	If yes, expl	ain:				
		-				

Education				
High school:	Address:			
From: To:	Did you graduate?	Yes □ N	o 🗆 Di	ploma:
College:	Address:			
From: To:	Did you graduate?	Yes □ N	o 🗆 De	egree:
Other:	Address:			
From: To:	Did you graduate?	Yes □ N	o 🗆 De	egree:
Skills and Qualifications		ler.		
Please check any of the following s Accounting Carpentry CDL License A B Chemical Construction Electrical Farm Experience Heavy Equipment:	kills you possess and equipment you Grain Handling Graphic Design Heavy Machine Repair IT Pharmaceutical Robotics	ı are qualifie		Welding Other:
Light Equipment:				
Additional job-related training, skills, licenses, certificates, and/or other qualifications you want us to know about you:				
Are you afraid of heights?	you afraid of heights? □ Yes □ No			
Professional Organization	s			
ORGANIZATION	DESCRIBE YOUR EX	PERIENCE /	INVOLVEMENT	T / ROLE
Please list job-related organizations, clu	ubs, or other associations to which you be	elong (or have	in the past), an	nd what your experience or involvement looked like.

Previous Employment

List your most recent employer first.

1.	Company:					Supervisor:			
	Phone:					Email:			
	Address:					Hourly/Salary Rate	Starting: \$	Final: \$	
	Job title:					Employed From:		То:	
	Responsibilities:								
	Reason for leaving:								
	What did you like mos	t about your position?							
	What were the things	you liked least about the	e position?						
	May we contact your p	previous supervisor for a	reference?	Yes □	No □				
2.	Company:					Supervisor:			
	Phone:					Email:			
							Otrafica A	Eist A	
	Address:					Hourly/Salary Rate	Starting: \$	Final: \$	
	Job title:					Employed From:		To:	
	Responsibilities:								
	Reason for leaving:								
	What did you like mos	t about your position?							
	What were the things	you liked least about the	e position?						
	May we contact your p	previous supervisor for a	reference?	Yes □	No □				
3.	Company:					Supervisor:			
	Phone:					Email:			
	Address:					Hourly/Salary Rate	Starting: \$	Final: \$	
	Job title:					Employed From:		То:	
	Responsibilities:								
	Reason for leaving:								
	What did you like mos	t about your position?							
	What were the things	you liked least about the	e position?						
	May we contact your p	previous supervisor for a	reference?	Yes □	No □				

Explain any gaps in your employ	yment:		
Have you ever been fired or ask resign from a job?	xed to Yes □	No 🗆	
If yes, plea	ase explain:		
References			
		<u>business/work references</u> who are NOT related to you. include a minimum of three (3) school or personal ref	
1. Name:		Relationship to you:	Years Known:
Email:		Phone:	
2. Name:		Relationship to you:	Years Known:
Email:		Phone:	
3. Name:		Relationship to you:	Years Known:
Email:		Phone:	
4. Name:		Relationship to you:	Years Known:
Email:		Phone:	
Military Service			
Branch:		From:	То:
Rank at discharge:		Type of discharge:	
If other than honorable, explain	:		
Disclaimer and signatu	re		
		not submitted false or misleading information, omitted or misre presentations discovered in my application or interview may resu	
I understand that employment with Sauder Fee	eds, Inc. is at will, and can be terminat	at these rules and/or information provided in the employer hand ted, with or without cause and with or without notice, at any time with or without notice, at any time by the company.	
	I claims I may have regarding the emp	ents to contact and obtain information from all references (perso ployer, its agents, employees or representatives for seeking, gath tions for furnishing such information about me.	
		k, race, color, religion, national origin, citizenship, genetic inform to limit or exclude an applicant from employment consideration	