

Sauder Feeds, Inc.

Employment Application OFFICE POSITIONS

Personal Ir	nformation				Da	ate 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 wareach ye	
	Driver's Licenso	e Number	State	Expiration Date	,	ou.
Start Date you	would be available:				De	esired Pay: \$
Work Schedule	e You Desire:	☐ Full-time	e	□ Temporary		
		□ Part-time		□ Seasonal		
Position applie	d for:					
		(Manufacturing/	Production, CDL Driv	er, Office, Maintenance, S	aturday Help)	
Are you able to	meet the attendance re	quirements of	f this position?	? 🗆 Yes 🗆	No [\square I need more information about the attendance requirements
Will you work o	vertime if required?	☐ Yes	□ No □	On Occasion		
How did you he	ear about us?					
If you are unde	er 18 years old, can you p	rovide a work	permit if real	uired? ☐ Yes	□ No	
ii you aro ariao	. 10 yours ora, our you p	novido a wom	r pormie ii roqe		□ 1 10	
	eligible for employment i required if hired.)	n the United S	States?	□ Yes	□ No	
are applying (w	perform the "essential for its price in the perform the second bloom to be presented in the performance in t	e accommoda	ition)?		□ No	□ I need more information about the job's "essential functions"
Note: This question is no the existence of a disability at a later stage, to the exte	t designed to elicit information about an app y, particular accommodation, or whether acc ent permitted by law.	olicant's disability. Pleas commodation is necessa	e do not provide informa ry. These issues may be	e addressed		
Have you ever	been employed here?			□ Yes	□ No	If yes, when?
Have you ever	been convicted of a felor	ıy?		☐ Yes	□ No	
	If yes, expla					

Education								
High school:			Address:					
From:	To:		Did you graduate?	Yes □	No □	Diploma:		
College:			Address:					
From:	To:		Did you graduate?	Yes □	No □	Degree:		
Other:			Address:					
From:	To:		Did you graduate?	Yes □	No □	Degree:		
Skills and Qual								
Please check any of the following skills you possess Accounting Adobe Creative Suite Acrobat Illustrator InDesign Photoshop Lightroom PremierePro Bookkeeping Calendar Management Customer Service Data Entry Event Planning Heavy Equipment:			☐ Farm Experie ☐ Graphic Desi ☐ Human Reso ☐ iRely Softwar ☐ Marketing ☐ Microsoft Off	nce (Agric gn urces e ice Suite Word				
Additional job-relate skills, licenses, cert and/or other qualifi want us to know ab	ificates, cations you							
Professional O	rganizatio	15		VDEDIE: 10 -	· / IBN/013/=	TAMENT (DOLE		
ORGANIZATION Please list iob-related	organizations of	lubs, or other asso		DESCRIBE YOUR EXPERIENCE / INVOLVEMENT / ROLE iations to which you belong (or have in the past), and what your experience or involvement looke				
, loade list job-l clated	organizacions, o		Saciona to willon you k	Joiong (UI III	aro in une pa	osy, and muc your experience of 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	position?						
	May we contact your p	previous supervisor for a	reference?	Yes □	No □				
2.	Company:					Supervisor:			
	Phone:					Email:			
	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 position?								
	May we contact your previous supervisor for a reference? Yes \square No \square								
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	position?						
	May we contact your p	previous supervisor for a	reference?	Yes □	No □				

Ex	plain any gaps ir	n your employment:							_
	ave you ever been sign from a job?	en fired or asked to	Yes □	No □					
		If yes, please explain:	I						
Re	eferences								
Pleas	ase list the names and	nd telephone numbers of a minim							
		and character qualities. If not ap	эрисавіе, ріваз	se include a minimu		ial reterences who ar	e NUT related		
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:				
Mi	ilitary Servic	ce							
Bra	anch:				From:		To:		
Ra	ank at discharge:	:			Type of discharge:				
If (other than honor	rahle explain							
" "	Allor dian none.								
Di:	sclaimer and	d signature							
		re true and complete to the best of my	knowledge. I ha	ave not submitted false	or misleading information, omitted c	or misrepresented myseli	f in this applica	tion If this application leads	to
em	ployment, I understand t	that false or misleading information, o	omissions or misre	representations discove	ered in my application or interview ma	nay result in my employme	ent or compens	sation being terminated at any	y time.
l un	nderstand that employme	or to the Company's rules and regulation nent with Sauder Feeds, Inc. is at will, a y employment may be changed, with or	and can be termin	inated, with or without c	cause and with or without notice, at a				
and	d education institutions a	ation, the employer, its representatives and to all rights and claims I may have nt process and all other persons, corpor	e regarding the en	employer, its agents, em	nployees or representatives for seekin				
		erate unlawful discrimination or harass state or local law. No question on this a							
Ap	plicant Signature	re:			D	Date:	/	/	_



Email

Mail