

Loudonville Farmers Equity is an equal opportunity employer. Loudonville Farmers Equity does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

## PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name \_\_\_\_\_ SSN \_\_\_\_\_  
 Address \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Phone \_\_\_\_\_

Are you a legal citizen of the U.S.?  Yes  No

If no, are you eligible to work in the U.S. and/or can you provide such authorization?  Yes  No

Are you at least 18 years or older?  Yes  No  
 (If no, you may be required to provide authorization to work.)

Have you ever been terminated from employment or asked to resign by an employer?  Yes  No  
 If yes, please provide company names and details \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony?  Yes  No  
 If yes, explain \_\_\_\_\_

Can you work any shift?  Yes  No  
 If no, explain \_\_\_\_\_

Can you work overtime, including weekends?  Yes  No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation?  Yes  No

## EMPLOYMENT DESIRED

Date you can start \_\_\_\_\_ Hourly rate/  
 Position desired \_\_\_\_\_ Salary desired \_\_\_\_\_

Have you ever worked for this company before?  Yes  No

If yes, provide dates and position \_\_\_\_\_

Are you currently employed?  Yes  No

If yes, may we inquire of your present employer?  Yes  No

EDUCATION	Name & Location of school	Number of years attended	Degree received	Subjects studied/Major
High School				
College or University				
Trade, Business or Correspondence School				

**MILITARY SERVICE**

Branch \_\_\_\_\_  Active     Reserve     Inactive  
 From \_\_\_\_\_  
 To \_\_\_\_\_

If Active or Reserve, please list current responsibilities and commitments

\_\_\_\_\_  
 Type of Discharge \_\_\_\_\_  
 If other than honorable, explain \_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYMENT HISTORY**

Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

Employer Name \_\_\_\_\_ From \_\_\_\_\_  
 Phone \_\_\_\_\_ To \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 Job duties \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Employer Name \_\_\_\_\_ From \_\_\_\_\_  
 Phone \_\_\_\_\_ To \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 Job duties \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

Employer Name \_\_\_\_\_ From \_\_\_\_\_  
 Phone \_\_\_\_\_ To \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 Supervisor \_\_\_\_\_  
 Job duties \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_

**EMPLOYMENT HISTORY CONTINUED**

Employer Name _____	From _____
Phone _____	To _____
Address _____	Job Title _____
Supervisor _____	
Job duties _____	
Reason for leaving _____	

Do you have any special skills, experience, licensures and/or training that would enhance your ability to perform the position applied for?  
 If yes, explain \_\_\_\_\_  
 \_\_\_\_\_

**REFERENCES**

Give the names of three (3) persons not related to you, whom you have known at least three (3) years.

Name		Address, Phone, Email	Company/Relationship
1.			
2.			
3.			

**Please read carefully before signing.**

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Loudonville Farmers Equity Company to hire me. If I am hired, I understand that either Loudonville Farmers Equity or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Loudonville Farmers Equity has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Loudonville Farmers Equity true and complete information on this application. No requested information has been concealed. I authorize Loudonville Farmers Equity to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature	Date
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**THIS APPLICATION IS VALID ONLY FOR ONE (1) YEAR FROM THE DATE ABOVE.**