

Anthony Farmers Cooperative NON-DOT Employment Application

Anthony Farmers Cooperative ("The Cooperative") is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion, national origin, marital status, physical or mental handicap, arrest record or any other characteristic protected by federal, state and/or local laws. No question on this application is intended to secure information to be used for such discrimination. This application will be given every consideration, but its receipt does not imply that the applicant will be employed. This application will remain effective for a period of thirty (30) days or until the position is filled.

If you would like to request a reasonable accommodation to complete this form, please contact a Human Resources representative.

Applicant Information								
Full Name:			Date:					
	Last	First	M.I.	·				
Address:								
	Street Address			Apartment/Unit #				
	City		State	ZIP Code				
Mobile Phone:		Email:						
Position Desir	ed:							
Date Available	e: Hourly	Rate/Salary Desired:						
Are you prese	ntly employed?	NO If yes, may we contact y	our employer?	☐ YES ☐ NO				
If presently employed, why are you considering leaving?								
Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer or Human Resources before answering the question. YES NO How were you referred to the company?								
Are you legally eligible to be employed in the United States? Proof of eligibility will be required upon employment								
Are you 18 years old or older? ☐ YES ☐ NO Proof of age maybe required								
Have you ever	worked for this company before?	☐ YES ☐ NO						
If yes, where?								
Supervisor:		Reason for leaving:						
Have you ever been convicted of a crime? A "yes" answer will not automatically disqualify you from employment. We will consider the nature and date of the offense and the job for which you are applying for job-related purposes only, and only to the extent permitted by applicable law. YES NO If yes, explain:								
Education								
	Name and Location of School	Course of Study	Number of years completed	Diploma or Degree Received				
High School								
College or University								

Trade, Business or other School					
Other education, training or spe	ecial skills:				
	Previous Er	nployment			
Include your last seven (7) years o backwards in time. Please include separate sheet of paper.	f employment history, including pe	eriods of unemploymen	t, starting with the additional em	ne most recent and wor ployers, please attach o	king on a
From: To:	Company:_				
Job Title:		Reason for leaving:			
Address:		Phone:			
Duties:		Leaving Salary:			
Supervisor:		May we contact?	☐ YES	□NO	
From: To:	Company:_				
Job Title:		Reason for leaving:			
Address:		Phone:			
Duties:		Leaving Salary:			
Supervisor:		May we contact?	☐ YES	□NO	
(initial) I voluntarily by contacting any person or entity my personal or educational backgr related to you, whom you have known to the contact of the conta	ound, work experience, character	nd any of its officers, em priate reference. I unde	rstand that these	e questions may be abo	out
Name	Occupation & Compar	ıy Relationship	& # of years	Phone Number	
					_
	Disclaimer ar	nd Signature			
I certify that the foregoing statements history and authorize any present/for information they may have regarding furnishing and receiving this informat disqualification for employment cons. I further agree that, if employed, I will no personnel recruiter, interviewer of for employment for any specified per course of my employment shall not be granting of an interview creates a content of the course of th	mer employer, person, firm, corpora me and I release the Company and tion. I understand that failure to revi ideration or, if hired, may be ground I conform my conduct to the Compa to other representative other than an iod of time and that any employment be construed as a contract. I further intract for either employment or prov	ation, credit agency or god all providers of informate eal any omission or misle is for termination from the any's rules, regulations ar officer of the Company hat manuals or handbooks understand that nothing oriding any benefit, and The	vernment agency ion from any liab eading information of Company. Independent of the personnel policies as authority to erthat may be districted in this east ontained in this east of the person of t	y to give the Company ar ility as a result of in by me can result in cies. I understand that iter into any agreement ributed to me during the application or the	ıy
Signature:			Date:		