



PO Box 155
317 Osborn St
Hemingford, NE 69348

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, disability, veteran status, marital status, religion or any condition prescribed by state or local law. Farmer's Coop Elevator of Hemingford, Hay Springs, and Gordon is an Equal Opportunity Employer

Employment Application

Knowledge • Commitment • Success

Personal Information

Name (Last, First, MI) _____

Date _____

Street Address _____

Social Security # _____

City _____ State _____ Zip Code _____

Home Phone _____

Have you lived at this address for the past three years? Yes _____ No _____

Cell Phone _____

If "no", please provide the addresses for the past three years.

Street Address _____

Work Phone _____

City _____ State _____ Zip Code _____

Email _____

Street Address _____

Position Desired _____

City _____ State _____ Zip Code _____

Will you be willing to work overtime?
Yes _____ No _____

Were you referred by someone to apply at Farmer's Coop? Who? _____

This Application does not in any way guarantee the applicant an interview or employment

Are you legally eligible for employment in the United States? Yes No

If you are a citizen or a national of the U.S. or a lawful Permanent Resident, you ARE eligible for employment. If you are a non-resident alien (not a citizen or a national of the U.S. or lawful Permanent Resident), your ELIGIBILITY FOR EMPLOYMENT is DEPENDENT ON YOUR STATUS

Verification of Identity and Eligibility Status

Any offer of employment is contingent upon whether your visa or citizenship status allows you to legally perform the job offered to you. In order to confirm your eligibility for employment, you must complete the USCIS Employment Eligibility Verification (Form I-9), which requires you to attest that you are a citizen or national of the U.S., a lawful Permanent Resident or an alien authorized to work and requires you to provide documents to verify your identity and employment eligibility.

Have you been convicted of, pled guilty, or pled no contest to a felony or misdemeanor. Do you have a court order restraining you from contacting, harassing, stalking or threatening another person? Convictions that have been annulled, expunged, or sealed by a court do not need to be listed. Yes No

If you answered "Yes", please describe the circumstances of the conviction, plea, or event. _____

The existence of a conviction or restraining order identified above is not considered an automatic disqualification for employment. Farmer's Coop Elevator will consider the information and determine it's relevance to the position depending on the circumstances.

Farmer's Coop Requires Pre-Employment Drug Testing and Motor Vehicle Reports
Employment is contingent on a clear drug test and a satisfactory MVR

Education

Please List the name and location of the last school you attended. _____
High School Business/Trade School College Graduate School

Course of Study? _____ Final Year Completed? _____

Did you Graduate Yes No Highest Degree or Diploma? _____

List courses taken the are relevant to the position desired? _____

List other training or skills that would be useful (machine operation, maintenance, etc) _____

Military

Have you served in the U.S. Armed Forces? Yes No

If "Yes", what Branch did you serve in and what was the Characterization of Military Discharge? _____
The existence of a dishonorable, bad conduct or a discharge under other than honorable conditions does not automatically bar employment. The Information will be evaluated to determine the relevance to the position sought, based on the totality of the circumstances.

Describe any training relevant to the position you are applying ? _____

Please give a FULL and ACCURATE description of all full and part time employment. All applicants provide the following information on all employers for the past three years. Applicants with a CDL, or to drive a commercial vehicle (over 10,000lb) must provide information for the past 10 years on those employers for whom they operated a commercial vehicle. List the complete mailing address, street number, city, state, zip code, and phone

Previous Employment History

Most Recent

Company Name _____ Telephone Number _____

Address _____ Dates of employment _____

Supervisor Name and Phone _____

Reason for Leaving _____

Description of job duties

Were you subject to the FMCSR while employed Yes No Did you transport HazMat? Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

Next Recent

Company Name _____ Telephone Number _____

Address _____ Dates of employment _____

Supervisor Name and Phone _____

Reason for Leaving _____

Description of job duties

Were you subject to the FMCSR while employed? Yes No Did you transport HazMat? Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

Third Recent

Company Name _____ Telephone Number _____

Address _____ Dates of employment _____

Supervisor Name and Phone _____

Reason for Leaving _____

Description of job duties

Were you subject to the FMCSR while employed? Yes No Did you transport HazMat? Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

Employment History Cont.

Fourth Recent

Company Name _____ Telephone Number _____

Address _____ Dates of employment _____

Supervisor Name and Phone _____

Reason for Leaving _____

Description of job duties _____

Were you subject to the FMCSR while employed? Yes No Did you transport HazMat? Yes No

Was your job designated as a safety-sensitive function in any DOT-regulated mode subject to the drug and alcohol testing requirements of 49 CFR Part 40? Yes No

Those seeking employment driving or operating equipment are required to complete this section

Driving & Equipment Experience

Licenses

State	License Number	Type of License	Operators, Learners, CDL	Expiration Date

Vehicle Experience

Type of Vehicle	Body (tank, box, flat)	From	DATES	to	Approx mileage
P/up and Trailer					
Straight Truck– without trailer					
Straight Truck with Trailer					
Tractor and semi-trailer					

Crash record for the past 3 years or more (attach additional pages if needed). If you have none, write "NONE".

Crash History

Dates	Nature of Crash	Number of Fatalities	Number of Injured
Most Recent			
Next Previous			
Next Previous			

Traffic convictions and forfeitures for the past 3 years (other than parking violations). If none, write "NONE".

Traffic Violation and Convictions

Location	Date	Charge	Penalty

Has your license or permit ever been revoked? Yes No
 Have you ever been denied a license or permit to operate a motor vehicle? Yes No
 If the answer is yes to either question, provide a statement of explanation.

Equipment Operated

Type of Equipment Operated	Size	# of years	Job Function

