

**APPLICATION FOR EMPLOYMENT**

DATE \_\_\_\_\_

Name \_\_\_\_\_  
Last                      First                      Middle                      Maiden

Present address \_\_\_\_\_

Permanent address (if different from above) \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Mobile Phone Number \_\_\_\_\_

Email address \_\_\_\_\_

Preferred method of contact     Home Phone     Mobile Phone     Email

Position applied for \_\_\_\_\_

Days/hours available to work

How many hours can you work weekly? \_\_\_\_\_

No Pref \_\_\_\_\_ Thur \_\_\_\_\_  
 Mon \_\_\_\_\_ Fri \_\_\_\_\_  
 Tue \_\_\_\_\_ Sat \_\_\_\_\_  
 Wed \_\_\_\_\_ Sun \_\_\_\_\_

Employment desired     FULL-TIME ONLY     PART-TIME ONLY     FULL- OR PART-TIME

When available to start work? \_\_\_\_\_

Can you, after employment, submit verification of your eligibility to work in the United States?     Yes     No

Can you perform, with or without reasonable accommodation, the essential functions of the job applied for?     Yes     No

Have you ever applied to this company before?     Yes     No    If so, when (what date?) \_\_\_\_\_

Were you referred to our company by someone?     Yes     No    If so, who? \_\_\_\_\_

Name(s) of any family members currently employed at Kuhn Orchards \_\_\_\_\_

What Foreign Languages do you fluently speak, read or write? \_\_\_\_\_

Emergency Contact \_\_\_\_\_  
Name                      Phone Number                      Relationship

Are you under 18 years of age?     Yes     No    If yes, can you submit a work permit once hired?     Yes     No

If a minor, list the name and contact info. of a parent or guardian

\_\_\_\_\_  
Name                      Address                      Phone                      Relationship

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?     No     Yes    (NOTE: A conviction will not necessarily disqualify applicant from the desired position)

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

DO YOU HAVE A DRIVER'S LICENSE?     Yes     No

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_     Operator     Commercial (CDL)  
 Expiration date \_\_\_\_\_

Have you had any accidents during the past three years?                      How many? \_\_\_\_\_

Have you had any moving violations during the past three years?                      How Many? \_\_\_\_\_

<b>Work Experience</b> Please list your work experience for the <b>past five years</b> beginning with your most recent job held. If you were self-employed, give firm name. <b>Attach additional sheets if necessary.</b>			
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			
Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer?     Yes     No

**PLEASE READ CAREFULLY**

I understand that nothing contained in this application or in the granting of an interview creates a contract between the company and me for either employment or the providing of any benefit. No promise regarding employment has been made to me, and no such promise shall bind the company unless made in writing by its owner and/or general manager. If the company hires me, I acknowledge that no consideration has been or shall be furnished to the company for my employment other than the services I shall render to it.

The answers which I have given herein are true and complete. I authorize the company to investigate all statements contained in this application for employment as may be necessary or appropriate in arriving at an employment decision. I authorize all person and entities, including but not limited to schools, previous employers (unless otherwise indicated) and law enforcement agencies, to supply the company with information about my background, and I release everyone from liability for any damage that may result from furnishing information to the company.

I understand that if hired: (1) my employment could be made contingent on my taking and passing a job-related medical examination and/or test for illegal drug use, both of whose fees the company would pay; (2) my employment will not be for a definite period but would be irrevocably at will, meaning that I can be discharged at any time, either with or without cause or prior notice; (3) no one would have any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the above provision that my employment with the company would be irrevocably at will; (4) I would be required to submit proof of my eligibility to work in the United States; (5) I can be immediately discharged for having given false or misleading information in my application or interview(s); (6) I will be required to obey all rules and policies of the company; (7) I will be expected to work on any day during the company's workweek and to work overtime upon request; (8) I will be responsible for arranging my own transportation to and from work; and (9) except for the term of employment which specifies my employment with company will be irrevocably at will, the company can, for any reason or no reason, change, revoke or add to the terms and conditions of my employment at any time by notifying me of the change, revocation or addition and by remaining in the company's employment after being so notified, I will have agreed to the change, revocation or addition. T

The foregoing states the entire arrangement between me and the company on the matters it covers. There are no oral or collateral agreements of any kind.

**Please check one:**

- I have read and understand the above statement
- The above statement was read to me by the following representative and I understand what was read to me:

\_\_\_\_\_

Did you complete this application yourself?     Yes     No    If not, who did? \_\_\_\_\_

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

