



Application for Employment MN

Employment History

A resume may be attached but will not be accepted in place of any information required on this form.

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> Yes, but only after I have given current employer my notice to terminate employment.	

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Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
Ending Salary:	Name and Title of Immediate Supervisor:
Telephone Number:	Your Title:
Reason for leaving:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Dates (mm/yy) From: to	Name of Employer:
Starting Salary:	Address:
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Telephone Number:	Your Title:
Reason for leaving:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	



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Telephone Number:	Your Title:
Reason for leaving:	Duties:
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Education

Please complete for all that apply.

	School / Organization Name	Location (City/State)	Field of Study / Degree
<input type="checkbox"/>	Some high school		
<input type="checkbox"/>	High school graduate / G.E.D.		
<input type="checkbox"/>	Some college		
<input type="checkbox"/>	Associate degree		
<input type="checkbox"/>	Bachelor's degree		
<input type="checkbox"/>	Professional certification/Other		

References

Please provide at least three professional references.

Name	Company	Title	Phone / Email

Applicant Statement

I certify that the answers given in this application are true and correct and that I have not withheld any facts or circumstances. I understand that all answers given on my application for employment are subject to verification. I understand that if I'm employed by Cooperative Farmers Elevator, any false statement, misrepresentation, or omission of facts on this application of employment or on any supporting documents, regardless of when discovered to be false or omitted, may be sufficient reason for immediate dismissal.

I understand that the information provided in my application for employment will be verified, including academic background, employment history, and any criminal convictions which may be on my record. I give Cooperative Farmers Elevator consent to conduct a background and criminal record check. I also authorize my past employers and schools to give to Cooperative Farmers Elevator pertinent information about me. I also understand that all offers of employment are contingent upon verification of the information provided in my application of employment.

Signature: _____

Date: _____

Print Name: _____