

Volga-Bruce Ag Center Employment Application

Date: _____

Name: _____
(Last) (First) (M.I.)

Date of Birth: ____/____/____

Address: _____ City: _____

State: _____ Zip: _____ Phone #: _____

Position Applying for: _____

Date you can start: _____

Education:	School Name and Location	Number of years attended or highest grade completed	Type of Diploma/Degree/Certificate	Major
High School				
College/University				
Trade/Business School				

If needed for work, do you have the following:

___ Drivers License
 ___ Automobile
 ___ CDL

Availability:

Hours: ___ Full Time ___ Part Time ___ Either
 Shift: ___ Any ___ Day ___ Night ___ Both

Driving History:

Violations: ___ No ___ Yes If yes, please explain: _____

Work History: Please describe your most recent/relevant jobs including military.

Company Name: _____ Job Title: _____ Start Date: _____ Company Address: _____ Date Job Ended: _____ Salary/Hourly Wage _____ Reason for Leaving: _____ Describe Job Duties: _____
Company Name: _____ Job Title: _____ Start Date: _____ Company Address: _____ Date Job Ended: _____ Salary/Hourly Wage _____ Reason for Leaving: _____ Describe Job Duties: _____
Company Name: _____ Job Title: _____ Start Date: _____ Company Address: _____ Date Job Ended: _____ Salary/Hourly Wage _____ Reason for Leaving: _____ Describe Job Duties: _____

List Three References:

Name: _____ Address: _____ Phone: _____
 Name: _____ Address: _____ Phone: _____
 Name: _____ Address: _____ Phone: _____