

**Employment Application Eastern Colorado Seeds, LLC.** 

Personal Information					
MI)		Date of Birth			
Mailing address					
ber	Mobile phone number				
	E-mail address				
mber	Commercial Driver's License (number/state/exp.)				
	(if	job involves any di	riving)		
In case of accident or illness, please contact:					
Daytime pho	one	Relationship			
Desired					
)r					
about this position?					
work	Desired hours	Desired hours (full time, part time, etc.)			
Name and Address of School	Course of Study	Total Years of Study	Degree/ Diploma		
(Specify)       List any seminars, classes or other education not listed above which may help qualify you for this position (if you need additional space, please use page 7):					
	MI) Der Der mber cor illness, please contac Daytime pho Desired or about this position? work Name and Address of School	MI) Der Mobile phone E-mail address nber Commercial D (if) or illness, please contact: Daytime phone Desired or about this position? work Desired hours Name and Address of Course of School Study classes or other education not listed above	MI) Date of 1 Da		

**Employment History** List below all present and past employers over the past ten years, starting with your **most recent** employer. Account for all periods of unemployment. You must complete this section even if attaching a resume. May we contact your current employer? YES NO

1.	Employer (current 🗆 Yes 🗌 No)		Start Date	End Date	Essential job functions of final position	
	Address				1.	
	City, State, Zip		Starting Salary	Ending Salary	2.	
	Phone number				3.	
	Fax number	Supervisor	r(s)	1	4.	
	Job position(s)	E-mail address of supervisor				
	Reason(s) for leaving					
What value did you add to this company or its customers?						
2.	Employer		Start Date	End Date	Essential job functions of final position	
	Address				1.	
	City, State, Zip		Starting Salary	Ending Salary	2.	
	Phone number				3.	
	Fax number	Supervisor(s)		4.		
	Job position(s)	E-mail address of supervisor				
	Reason(s) for leaving					
	What value did you add to this company or its customers?					

Employer Start End Essential job functions of 3. final position Date Date Address 1. City, State, Zip Ending Starting Salary Salary 2. Phone number 3. Fax number Supervisor(s) 4. Job position(s) E-mail address of supervisor Reason(s) for leaving What value did you add to this company or its customers? Employer End Essential job functions of Start 4. final position Date Date Address 1. City, State, Zip Starting Ending 2. Salary Salary Phone number 3. Fax number Supervisor(s) 4. Job position(s) E-mail address of supervisor Reason(s) for leaving What value did you add to this company or its customers?

Additional Information				
List any professional, tr business or civic activit and offices held. You r exclude membership the would reveal gender, ra religion, national origin ancestry, age, disability any other protected state	ies nay at ce, , or us.	English that you or	n speak road or write	e that could be of benefit to
the position applied for:		English that you ca	in speak, read or write	
		Fluent	Good	Fair
Speak				
Read				
Write				
Identify formal job training that relates to this position: Identify what skills or certification you possess related to this position:				
If you are hired, what ve would you add to our company?	alue			
Describe what you believe are the most unique features of your work history:				

# **Additional Information**

Have you ever been convicted of a felony or misdemeanor? If yes, please explain:	□ Yes □
Have you in the last 7 years been convicted of Driving Under the Influence "(DUI)"?	□ Yes □
If you are under 18 years of age, can you provide proof of your eligibility to work?	□ Yes □
If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.?	□ Yes □
Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation?	□ Yes □
If hired, are there any accommodations the company would need to provide so that you can perform all those essential functions and duties of the position being applied for? If yes, please explain:	□ Yes □
Are you able to lift 10 pounds?	□ Yes □
Are you able to lift 30 pounds?	$\Box$ Yes $\Box$
Are you able to lift 50 pounds?	$\Box$ Yes $\Box$
If hired, do you have a valid driver's license?	$\Box$ Yes $\Box$
If hired, do you have reliable transportation to and from work?	$\Box$ Yes $\Box$
Do you have asthma?	$\Box$ Yes $\Box$
Do you have seasonal allergies?	$\Box$ Yes $\Box$
Do you have a fear of heights?	$\Box$ Yes $\Box$
If hired, would you be able to travel or work overtime as needed? When was the last time you used Microsoft Excel? What did you do in that program?	
When was the last time you used Microsoft Word?	
	- □ Yes □

## References

List below three persons not related to you or former supervisors who have knowledge of your work performance within the last 5 years

Name		Occupation		
Company name	Address			
Telephone	E-mail	Relationship & years acquainted		
Name		Occupation		
Company name	Address			
Telephone	E-mail Relationship & years acquainted			
Name		Occupation		
Company name	Address			
Telephone	E-mail	Relationship & years acquainted		
Additional Space	•			
Additional space provided to ex	pand on any points or questions a	sked previously in this		
application				

# PLEASE USE ADDITIONAL PAPER IF NECESSARY

### Please read each statement closely and initial each acknowledging your understanding

#### **Equal Employment Opportunity Statement**

This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

#### **Discrimination and Sexual Harassment Policy Statement**

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

#### **Disclosure to Applicants Concerning Drug/Alcohol Testing**

If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

#### **Complete and Accurate Information**

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

#### **At-Will Employment**

I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president.

#### **Testing Authorization**

If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

#### Investigation Authorization

I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

#### **Company Obligation**

I understand and agree that the Company's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

Signature

Date