

HUSKER AG, LLC
APPLICATION FOR EMPLOYMENT

Thank you for applying today! We offer competitive wages and benefits, and equal access to employment, programs, and services to all persons regardless of gender, age, race, national origin, religion, veteran status or disability. Those applicants requiring reasonable accommodation to the application and/or interview process should notify us. **YOU WILL BE NOTIFIED ONLY IF WE WISH YOU TO PROCEED THROUGH THE SELECTION PROCESS; YOU MAY UPDATE AND/OR CHECK ON THE STATUS OF YOUR APPLICATION AS YOU WISH.**

PERSONAL INFORMATION

Date of Application ____ / ____ / ____

Name _____ Soc. Sec. # ____ - ____ - ____
 Last First M.I.

Address _____
 Street City State Zip

Phone # Day (____) _____ Phone # Night (____) _____

EMPLOYMENT DESIRED

Position _____ Days ____ Evenings ____ Either ____

Date you can start _____ Wages/Salary desired _____

If possible, please read the Job Description for the position desired to answer the following questions:

Can you perform the essential functions of the job? Yes No

If not, what reasonable accommodations would you request? _____

Are you employed now? _____ May we contact you at work? _____

Have you ever applied to, or been employed by this company before? _____

When? _____

Referred by _____

EDUCATION	Name, Location of School	# Years Attended	Graduate?	Major
High School				
College				
Trade, Business, Other School				

GENERAL INFORMATION

Are you 18 years or older? Yes No

Are you legally eligible for work in this country? Yes No

Are you able to meet the attendance requirements of the job? Yes No

Have you been convicted of a crime, excluding misdemeanors or traffic violations, in the last 7 years? Yes No If yes, please explain _____

(A "Yes" answer does not automatically disqualify you from employment, because the nature of the offense, date, and type of job for which you are applying will be considered.)

FORMER EMPLOYERS (List below your last three employers, starting with the last one first.)

Date (Month & Year)	Name of Employer	Phone of Employer	Position	Supervisor	Reason for Leaving
From					
To					
From					
To					
From					
To					

We will be contacting former supervisors as references. May we contact your current employer? Yes No

If there is someone other than your supervisor you prefer we talk to, please list his/her name and phone:

Name _____ Phone _____

Name _____ Phone _____

Which of these jobs did you like best? _____

What did you like most about the job? _____

Special skills _____

Any accomplishments or other information you would like considered _____

I certify that all of the information submitted by me on this application is true and complete, and I understand that if any false information, omission, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I also understand that the company is a "drug free" workplace and that I will be required to undergo drug testing before being hired. In consideration of my employment, I agree to conform to the company's policies and procedures, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment, including number of hours and schedule of hours, may be changed, with or without cause, and with or without notice at any time by the company.

(Signature)

(Date)