



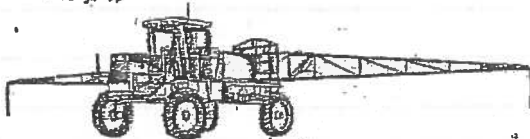
Moss Fertilizer Service

Thanks for thinking of us.

Please take a few minutes and complete this application.

Date _____

This application is active for 90 days.



PERSONAL DATA

Name _____

Address _____

City _____ State _____ Zip _____

Social Security Number _____

Phone Number _____

Are you 18 or older? No Yes

Ever convicted of a crime? No Yes

Explain _____

Have you ever been involved in a shortage or misunderstanding with respect to funds, merchandise, or inventory, etc.? No Yes

Explain _____

Job Interest _____

How did you hear of this job opening?

Name of Newspaper _____ Walk In

Referred By _____ Other _____

Wage Desired _____

Willing to work (check all that apply)

Full Time Part Time Temporary

Hours available to work: _____

Date Available _____

Date of Birth: _____

DLN: _____

Licence Type: _____

EDUCATION

LEVEL	NAME AND LOCATION	CHECK YEAR COMPLETED				GPA	DATES ATTENDED	GRADUATED		COURSE OF STUDY/ DEGREE EARNED
		1	2	3	4			YES	NO	
HIGH SCHOOL								YES	NO	
COLLEGE								YES	NO	
ADVANCED OR OTHER								YES	NO	

Are you enrolled in any courses at present? No Yes List _____

EMPLOYMENT RECORD

List employment beginning with your present or last job including United States Military Service. May we contact present employer? No Yes Former employer? No Yes

Dates Employed From _____ To _____	Company Name Address Job Responsibilities/Skills	Telephone # _____
Supervisor Reason for Leaving	Hourly Rate/Salary _____ per	
Dates Employed From _____ To _____	Company Name Address Job Responsibilities/Skills	Telephone # _____
Supervisor Reason for Leaving	Hourly Rate/Salary _____ per	
Dates Employed From _____ To _____	Company Name Address Job Responsibilities/Skills	Telephone # _____
Supervisor Reason for Leaving	Hourly Rate/Salary _____ per	

Academic, Personal, Professional, and Community Accomplishments _____

Any other employment or positions held? _____

Summarize special skills and qualifications from employment or other experience that may qualify you for work with our company.

REFERENCES

Name three persons not related to you or past supervisors mentioned above, who are acquainted with your character, work habits and achievements.

Name	Address	City	State	Phone	Occupation
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Names of friends or relatives working here _____

GOALS

Please write your short and long term goals.

CONTACTS IN CASE OF AN EMERGENCY: _____

APPLICANT'S STATEMENT

Except where otherwise indicated, I hereby authorize the companies, educational institutions, or persons named in this application to furnish any true information regarding myself, my education, or my employment whether or not it is on their records, personal or otherwise, releasing said companies or persons from liability for any damages whatsoever for issuing this information. Without reservation, I further authorize Moss Fertilizer, or any party or agency contacted by this employer to procure my consumer report and/or obtain or furnish information concerning my credit, criminal, motor vehicle, and other history. If required, I agree to a drug test prior to and during employment or for post accident occurrences.

I hereby certify that all the answers in this application are true and correct to the best of my knowledge and belief, it being understood that any material false statements or omissions of facts in this application will be sufficient cause for discharge. I will abide by and conform to all policies, rules, and procedures of Moss Fertilizer.

Signature of Applicant _____ Date _____

The Immigration Reform and Control Act requires Moss Fertilizer, to hire only U.S. citizens and aliens authorized to work in this country. Documentation verifying employment eligibility will be required in the event of hire. Inc., is an Equal Opportunity Employer and will not discriminate on the basis of race, color, sex, religion, national origin, age, or disability.