



## EMPLOYMENT APPLICATION

PHONE: 913-301-3281 FAX: 913-301-3288 Website: <http://www.freestategrowers.com>

Phone Number \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
No. Street City State Zip

How did you learn about us? Ad\_\_\_ Job Service\_\_\_ Friend\_\_\_ Walk in\_\_\_ Employee\_\_\_ Other\_\_\_

Position(s) applied for: 1. \_\_\_\_\_ Rate of pay expected \_\_\_\_\_

2. \_\_\_\_\_ Rate of pay expected \_\_\_\_\_

Want to work: Full-time: \_\_\_ Part-time\_\_\_ Temporary\_\_\_. Specify days and hours available \_\_\_\_\_

\_\_\_\_\_. Will you work extra time if requested? Yes\_\_\_ No\_\_\_

Have you ever been employed with us? Yes \_\_\_ No\_\_\_. If yes, give dates \_\_\_\_\_

On what date would you be available for employment? \_\_\_\_\_

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Last three employers (**start with your present or last job**):

1) Employer \_\_\_\_\_ Address \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_ Supervisor \_\_\_\_\_

Your job title \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

2) Employer \_\_\_\_\_ Address \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_ Supervisor \_\_\_\_\_

Your job title \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

3) Employer \_\_\_\_\_ Address \_\_\_\_\_

Employed from \_\_\_\_\_ to \_\_\_\_\_ Supervisor \_\_\_\_\_

Your job title \_\_\_\_\_ Rate of Pay \_\_\_\_\_

Work performed \_\_\_\_\_

Reason for leaving \_\_\_\_\_

To the best of your knowledge, are you able to perform the essential job functions of the position(s) applied for, physically or otherwise? (Including reaching, carrying, bending, stooping, climbing, squatting, sitting, pushing, pulling, and lifting up to 40lbs in most positions) Yes \_\_\_ No \_\_\_

List any experiences, skills, education, training, or qualifications that you feel would have prepared you for the position(s) for which you have applied \_\_\_\_\_

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If hired, are you able to provide the necessary employment eligibility documents to verify your eligibility to work in the United States? Yes \_\_\_ No \_\_\_

May we contact your present employer? Yes \_\_\_ No \_\_\_ your previous employers? Yes \_\_\_ No \_\_\_

I authorize the release and investigation of all information on this application as is necessary to help make a hiring decision. I certify that information given on this application is true and correct to the best of my knowledge.

If I am offered, and accept, employment with this Company, I understand that any false or misleading information given by me on this application or in an interview(s) may result in termination of my employment.

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*Applicant Signature*

*Date*

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