



EMP SERV, LLC

RAB

DO NOT RETURN APPLICATIONS TO THE BARNS

All applications must be returned to:

P.O. Box 188*Pipestone, MN 56164

Ph # 507-825-2532

Fax # 507-825-2541

**** Incomplete applications will be rejected****

PERSONAL (Please Print Clearly)

Position for which you are applying: _____

NAME: _____ **DATE OF APPLICATION:** _____

ADDRESS: _____
Street City State Zip code

PHONE NUMBER(S) _____
(Please include home, work, email or cell phone numbers where you can be reached)

PLEASE INDICATE THE BEST TIME TO CONTACT YOU: _____

I was referred by:

- Previously Employed – Date _____ General Inquiry Job Fair
- Classified Ad -which publication? _____
- EMP SERV, LLC Employee-name _____
- Other-please explain _____

Position applying for: Full-Time Part-Time Internship

Are you willing to work weekends? Yes No

Are you willing to relocate? Yes No

Due to Child Labor Laws, employees must be 16 years of age to participate in certain job responsibilities.

Are you at least 18 years of age? Yes No **Are you at least 16 years of age?** Yes No

Do you or anyone you live with have contact with swine? Yes No

If yes, please explain: _____

Do you or anyone you live with work with meat processing? Yes No

If yes, please explain: _____

Do you have reliable transportation? Yes No

Have you been convicted within the last five years of a felony? Yes No

If yes, please explain: _____

EDUCATION

Name and Location of School	Grade Completed	Did you Graduate?	Major
High School			
College or University			
Other			

EMPLOYMENT HISTORY (most current first)

1. _____
Company Name City State Zip

Employed: _____ Pay: _____
From To Starting Ending

Job Responsibilities: _____

Why did you leave? _____

Supervisor's Name: _____ Phone Number :() _____ Okay to contact? Y/N

2. _____
Company Name City State Zip

Employed: _____ Pay: _____
From To Starting Ending

Job Responsibilities: _____

Why did you leave? _____

Supervisor's Name: _____ Phone Number :() _____ Okay to contact? Y/N

3. _____
Company Name City State Zip

Employed: _____ Pay: _____
From To Starting Ending

Job Responsibilities: _____

Why did you leave? _____

Supervisor's Name: _____ Phone Number :() _____ Okay to contact? Y/N

___ Yes ___ No Have you been given a list of physical job requirements or had the essential functions of the job explained to you? (See Attached)

___ Yes ___ No Do you understand these essential functions?

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

Please list any relevant experience not listed in the Employment History Section: _____

Why are you interested in this position? _____

REFERENCES: List 2 persons, other than relatives, who are familiar with your work history. Your signature below indicates your consent for EMP SERV, LLC to contact these references.

1. _____
Name Address (Area Code) Telephone Occupation/Relationship

2. _____
Name Address (Area Code) Telephone Occupation/Relationship

I certify that the answers I have provided to the questions and statements are true and correct to the best of my knowledge. I understand that any omissions, misleading statements or incorrect answers made by me may render this application void and, if employed, would be cause for termination.

Signed: _____ Date: _____

Note: All applicants should be advised that the Social Security Administration verifies the validity and authenticity of information given to EMP SERV, LLC's Human Resource and/or Payroll Departments for proof of employment eligibility. Any employee found to have presented fraudulent or falsified documents will be subject to immediate disciplinary action, up to and including termination of employment. Federal law provides for imprisonment and/or fines for employees who present false documents and/or give false information in connection with the completion of the I-9. EMP SERV, LLC will provide no reimbursement, support or sponsorship for any employee found to have presented false information regarding employment eligibility.

EMP SERV, LLC does not discriminate based on race, color, religion, sex, disability, marital status, place of national origin, and other categories protected by law, with regard to employment, promotion, compensation and working conditions.

FOR OFFICE PERSONNEL FILES – DO NOT WRITE IN SPACE BELOW					
Employment at Location		Start Date		Wage	
Position		FT/PT		Interviewer & Date of Int.	