

Maple Leaf Farms APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

PERSONAL INFORMATION *Incomplete information could disqualify you from further consideration.*

Date _____

Name _____

Address _____

City _____ State _____

E-mail Address _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the U.S? Yes No

Are you at least 18 years or older? Yes No

During the last ten years, have you ever been convicted of a crime other than minor traffic offense? A Conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of crime, and rehabilitation will be considered. Yes No

If yes, please provide details (dates and location for all convictions)

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, please provide company names and details _____

Can you work any shift? Yes No

Can you work overtime, including weekends? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

EMPLOYMENT DESIRED

Date you can start _____ Hourly Rate/Salary desired _____

Position desired _____

Are you currently employed? Yes No If so may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us?

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> MLF Website | <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Referral (Please specify) _____ |
| <input type="checkbox"/> State Road 15 Sign | <input type="checkbox"/> Radio Ad | <input type="checkbox"/> Organization (Please specify) _____ |
| <input type="checkbox"/> Walk-in | | <input type="checkbox"/> Other (please specify) _____ |

Have you ever worked for this company before? Yes No Explain _____

Do you know anyone who works for our company? Yes No If yes, who? _____

EDUCATION	Name and location of school	No. of yrs. Attended	Degree Received	Subjects studied/Major
High School				
College or University				
Trade, Business or Correspondence School				

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	
From	To	Employer	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	
From	To	Employer	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving		Hourly Rate/Salary	
From	To	Employer Name	Telephone ()
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	

Reason for leaving	Hourly Rate/Salary
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Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? Yes No If yes, Explain _____

Computer Skills (please describe): _____

REFERENCES Give the names of three persons not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

Maple Leaf Farms is an equal opportunity employer. Maple Leaf Farms does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Maple Leaf Farms to hire me. If I am hired, I understand that either Maple Leaf Farms or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Maple Leaf Farms has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Maple Leaf Farms true and complete information on this application. No requested information has been concealed. I authorize Maple Leaf Farms to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Signature _____

THIS APPLICATION IS VALID ONLY FOR 90 DAYS FROM THE DATE SIGNED/DATED ABOVE.

PRE- AND POST-OFFER SELF-IDENTIFICATION FORM FOR PROTECTED VETERANS

This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. §4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

- A “disabled veteran” is one of the following:
 - a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
 - a person who was discharged or released from active duty because of a service-connected disability.
- A “recently separated veteran” means any veteran during the three-year period beginning on the date of such veteran’s discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An “active duty wartime or campaign badge veteran” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An “Armed forces service medal veteran” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Protected veterans may have additional rights under USERRA—the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

I IDENTIFY AS ONE OR MORE OF THE CLASSIFICATIONS OF PROTECTED VETERAN LISTED ABOVE

I AM NOT A PROTECTED VETERAN

I DO NOT WISH TO DISCLOSE MY STATUS

If you are a disabled veteran it would assist us if you tell us whether there are accommodations we could make that would enable you to perform the essential functions of the job, including special equipment, changes in the physical layout of the job, changes in the way the job is customarily performed, provision of personal assistance services or other accommodations. This information will assist us in making reasonable accommodations for your disability.

Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information provided will be used only in ways that are consistent with the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended.

The information you submit will be kept confidential, except that (i) supervisors and managers may be informed regarding restrictions on the work or duties of disabled veterans, and regarding necessary accommodations; (ii) first aid and safety personnel may be informed, when and to the extent appropriate, if you have a condition that might require emergency treatment; and (iii) Government officials engaged in enforcing laws administered by the Office of Federal Contract Compliance Programs, or enforcing the Americans with Disabilities Act, may be informed.

Date

Name

Signature

PRE-EMPLOYMENT INFORMATION FORM FOR WOMEN AND MINORITIES

Race/Ethnic Group:

Are you Hispanic/Latino?

If yes, check box and skip to Gender. Others use the race categories below:

White

Black

Asian

Am Indian/Alaska Native

Hawaiian/Pacific Islander

Two or More Races

Gender: Male: _____ Female: _____

I do not wish to disclose my race/ethnic and/or gender status

Date

Name

Signature

Please complete this information to assist us in complying with equal opportunity/affirmative action record keeping and reporting requirements. Providing this information is voluntary, refusal to provide the information will not result in any adverse treatment. This Information Form will be kept in a separate, confidential file and will be used only for government reporting purposes.