Application for Employment

Lagoner Farms 6895 Lake Ave. Williamson, NY 14589 315-589-4899 www.lagonerfarms.com

www.lagonenaims.com							
	Date						
Name							
Address							
Telephone ()Cell Phone ()							
Email							
In case of Emergency please notify							
Are you 18 years of age? Yes No If no, date of birth							
If you are a student between the ages of 14 and 18, you will have to furnish us							
with a Student Non-Factory Employment Certificate if you are hired. They are available							
at your school office.	•						
Are you prevented from lawfully becomin	ng employed in this country because of visa or						
immigration status? Yes No Proof of Citizenship & immigration status will be							
required upon employment.							
Position desired	Date you can start						
Time you are able to work: Part Time Full Time Number of hours Desired							
Do you know of any restrictions, personal or otherwise, which would restrict the hours							
you can work? Yes No If yes, Explain							
Do you have means of transportation to get to work? Yes No							
Education School Attended Years Graduate? Subjects studied							
High School							
College/							
Trade School							
Special skills							
Activities (hobbies, sports etc.)							
Why do you want to work for us?							
Please list any other qualification or skills	s you feel we should take into consideration						
and would enhance your application for e	employment						
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Former Employers (list below your last three employers, start with the most recent). Please list any previous employment and volunteer work, including babysitting etc.						
<u>Date</u>	Employer/ Address	Salary	Position	Reason for	leaving .	
	nces: Give the name of t one year who can give ers. Address	e a characte				
If yes, Have y	ou ever been convicted state the nature of the control of the cont	crime ed or asked				
No appl	icant will be excluded from	consideration	n for employm	ent due to prior a	arrest or convictions.	
that if a	that all the information sub- ny false information, omissi I and if I am employed, my	ons, or misre	presentations	are discovered,	complete. I understand my application may be	
my emp my or th employi	ideration of my employment ployment can be terminated ne company's option. I also ment may be changed, with ny. I understand that this ap	l, with or without on without can or without can be	out cause, and and agree tha ause, with or v	d with or without in t the terms and continuity to the terms and continuity	notice, at any time with conditions of my	
Signatu	re			Date		
	DO	O NOT WRITI	E BELOW TH			
Intervie Remark	wed by			Date		
Appea	rence:			Ability:		
Hired:	rence:NoPositior	1		Dept:		
Salary, Approv	/ Wage ved			starting Date		