

118 West Court Street P.O. Box 486 Beloit, KS 67420 800-657-5770 www.boettchersupply.com

Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age,						
disability, marital or veteran status, s			protected status			
	(4	PLEASE PRINT)				
Position(s) Applied For			Date of Application			
How Did You Learn About Us? (Please Circle)			ļ			
Advertisement	Friend	Walk-In				
Employment Agency	Relative	Other				
Last Name		First Name		Middle Name		
		FIISUNAINE				
Address	City		State	Zip Code		
Telephone Number(s)			Social Security Nur	nhor		
			Social Security Nul	liber		
If you are under 18 years of age, can you prov	vide required proof o	f your eligibility to work?	Yes	No		
Have you ever filed an application with us before	ore? Yes	No	If Yes, give date			
Have you ever been employed with us before'	? Yes	_ No	If Yes, give date			
Are you currently employed? Yes	No	May we contact your p	present employer?	Yes No		
Are you prevented from lawfully becoming em	ployed in this countr	y because of Visa or Imn	nigration Status?	Yes No		
(Proof of citizenship or immigration status	will be required up	oon employment.)				
On what date would you be available for work	?					
Are you available to work: Full Time	Part Time	Shift W	ork	Temporary		
Are you currently on "lay-off" status and subje	ct to recall? Yes	No				
Can you travel if a job requires it?						
Have you been convicted of a felony within the	e last 7 years? (Co	nviction will not necess	sarily disqualify an	applicant from employment.)		
If Yes, please explain						

Employment Experience

Start with your present or last job. Include any job-related military service assignments & volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates E	mployed	Work Performed
		From	То	WOIK Perionneu
Address				
Telephone Number(s)				
		Hourly R	ate/Salary	
Job Title	Supervisor	Starting	Final	
		_		
Reason for Leaving				
Employer		Dates Employed		
		From	То	Work Performed
Address				
Telephone Number(s)		1		
		Hourly R	ate/Salary	
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
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Employer			mployed	Work Performed
		Dates E From	mployed To	Work Performed
Address				Work Performed
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List professional, trade, business or civic activities and offices held.