



JOHN DEERE



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available		Desired Salary	
Position Applied for		Desired Location	
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Days & Hours Available for work: Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Overtime <input type="checkbox"/>			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
Do you have a driver's license? YES <input type="checkbox"/> NO <input type="checkbox"/> License #:		State of Issue	
If employed and under 18, can you furnish a work permit? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Can you perform the essential functions of the job(s) for which you are applying? YES <input type="checkbox"/> NO <input type="checkbox"/>			

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Highest Grade Completed 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 <input type="checkbox"/>
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree:
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree:

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company/Occupation	
Years Known	Phone
Full Name	Relationship
Company/Occupation	
Years Known	Phone
Full Name	Relationship
Company/Occupation	
Years Known	Phone

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	Ending Salary	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking.

Grossenburg Implement, Inc. is an equal employment opportunity employer. All applicants will be considered without regard to age, race, national origin, religion, disability, gender, or other protected status in accordance with applicable federal and state equal employment opportunity laws. Grossenburg Implement, Inc. will strive to accommodate any physical or mental limitations of employees or applicants in order to accomplish the essential functions of a job.

DISCLAIMER AND SIGNATURE

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all my answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications, including driving and/or credit history. YES NO

If hired I will be responsible for familiarizing myself with all rules and regulations of the company as they presently exist or are later modified. If hired I recognize that my employment can be terminated, at the discretion of the company or at my option, without notice, at any time, except specifically set forth in writing in a current individual employment agreement. YES NO

I also understand that no representative of the company has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the president. YES NO

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time YES NO

I have read, understand, and agree with the above YES NO

Signature of applicant	Date
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NOTE:

All personnel records are kept confidential and are not released to anyone without written authorization.

This application is valid for only 90 days from the date I signed. If I want to be considered for job openings more than 90 days from date signed, I will submit a new application.