

# TRAX FARMS, INC.

## APPLICATION FOR EMPLOYMENT

A Drug and Alcohol-Free Workplace

Applicants are considered for all positions without regard to race, color, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any other legally protected status.

**PLEASE PRINT CLEARLY. COMPLETE ALL ITEMS.**

**PERSONAL DATA:** Date: \_\_\_\_\_ Social Security Number: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Name: \_\_\_\_\_  
last first middle name

Present Address: \_\_\_\_\_  
number street city zipcode

Previous Address: \_\_\_\_\_  
(if less than 2 years at present address) number street city zipcode

Age (if under 18): \_\_\_\_\_ Birth Date (if under 18): \_\_\_\_\_ E-mail: \_\_\_\_\_  
month day year

Phone Number: \_\_\_\_\_ Emergency Notify: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**EMPLOYMENT DATA:** Have you filed an application here before? Yes  No

What type of employment are you applying for? Full time  Part Time  or Seasonal

If Part Time, about how many hours per week can you work? \_\_\_\_\_

Have you been employed here before? Yes  No  If yes, give dates: \_\_\_\_\_

Are you a U.S. Citizen or legally able to work in the United States? Yes  No  (Legal proof required)

What type of work are you applying for? \_\_\_\_\_

Will you accept other work if type of work applied for is unavailable? Yes  No

Date you can Start: \_\_\_\_\_ Can you work weekends: Yes  No

Enter hours you are available to work, write in "any" if you have no restrictions

	MON	TUE	WED	THU	FRI	SAT	SUN
FROM							
TO							

**STUDENTS:**

If you are under 18 or still in high school, do you have a current work permit? Yes  No

After school starts, are you available to work weekends  nights after school

Are you involved in activities that limit the hours you can work after school starts: Yes  No

If so, what days/hours can you work? \_\_\_\_\_ Date school starts? \_\_\_\_\_

**PAYROLL TAX DATA:**

How many exemptions do you wish to claim for federal income tax purposes? \_\_\_\_\_

What locality do you live in for local tax purposes? \_\_\_\_\_

What school district do you live in? \_\_\_\_\_

Have you paid all or any portion of your \$52 Local Services Tax for this year? Yes  No

<b>EDUCATION</b>	Name and Location	Course of Study	Years Completed	Graduated
High School			8 9 10 11 12	
College			1 2 3 4	
Trade or Other				

**WORK HISTORY:** List three most recent employers starting your current or last job:

Previous Employer	Phone	From	To	Name of Supervisor	Title
Street Address				Your Position	
City	State	Zipcode	Pay Rate start	Pay rate final	Reason for leaving
Previous Employer	Phone	From	To	Name of Supervisor	Title
Street Address				Your Position	
City	State	Zipcode	Pay Rate		Reason for leaving
Previous Employer	Phone	From	To	Name of Supervisor	Title
Street Address				Your Position	
City	State	Zipcode	Pay Rate		Reason for leaving

List any friends or relatives who have worked for Trax Farms:

Name

Name

**APPLICANT S STATEMENT:**

I affirm that all information in this application is true and complete. I understand that Trax Farms is a drug and alcohol-free workplace; therefore, if employed, I will consent to a drug and/or alcohol test after a workplace accident or anytime reasonable suspicion exists. I further understand that, if hired, Trax Farms will have an employment-at-will relationship with me; therefore, my employment may be terminated with or without cause at any time by either Trax Farms or myself. I understand that Trax Farms may contact past employers, as well as, verify all other information on this application as part of the employment process. I agree to comply with all rules, policies and procedures as set forth in this statement and in the Trax Farms employee handbook.

I have read and understand the above.

Signature \_\_\_\_\_

Date \_\_\_\_\_