

LAMERS DAIRY, INC.

N410 Speel School Road, Appleton, WI 54915 Phone 920-830-0980



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	Production <input type="checkbox"/>	Store <input type="checkbox"/>	Office <input type="checkbox"/> Delivery Route <input type="checkbox"/> Management <input type="checkbox"/>
Are you able to work any shift?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, explain
Are you eligible to work in the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Are you at least 18 years or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
How did you hear about us?	Walk-in <input type="checkbox"/>	Job Posting <input type="checkbox"/>	Referral <input type="checkbox"/> Other <input type="checkbox"/> _____

EDUCATION		
High School		Address
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address
Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

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

PREVIOUS EMPLOYMENT

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

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I authorize Lamers Dairy, Inc. to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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