

Andry Rasmussen & Sons, Inc.

P.O. Box 66, Cable, WI 54821
715-798-3355
info@andryras.com



Employment Application

APPLICANT INFORMATION

Last Name				First			M.I.			Date:		
Street Address							Apartment/Mailbox					
City				State			ZIP					
Phone				E-mail Address								
Date Available			Social Security No.				Driver's License No.					
Position Applied for							Desired Salary					
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"/>							
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?									
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain									

EDUCATION

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

PLEASE PROVIDE LICENSES/CREDENTIALS IF APPLICABLE

REFERENCES

Please list three professional references.

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:

Starting Wage:

Ending Wage:

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES NO

Company:

Phone:

Address:

Supervisor:

Job Title:

Starting Wage:

Ending Wage:

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES NO

Company:

Phone:

Address:

Supervisor:

Job Title:

Starting Wage:

Ending Wage:

Responsibilities:

From:

To:

Reason for Leaving:

May we contact your previous supervisor for a reference?

YES NO **MILITARY SERVICE**

Branch:

From:

To:

Rank at Discharge:

Type of Discharge:

If other than honorable, explain:

OTHER

Ability to lift 50 pounds:

YES NO

Emergency Contact/Phone:

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

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*