



PO Box 274 Arlington SD, 57212 983-4630

Application for employment:

In accordance with Federal Law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age*, or disability. (Not all prohibited bases apply to all programs).

To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice), or (202) 720-6382 (TDD). *You may be asked questions about these because of age requirements by law and ability to handle a certain weight may be required to do some jobs.

Personal Information

Date ___/___/___

Name (Last) _____ (First) _____ MI _____

Present address Street _____

City, state & zip _____

Phone number(s) _____ E-Mail _____

Permanent address (If different from current address)
(Street) _____

City, state & zip _____

Birthday ___/___/___*

* A state or federal document with birth date is required for state and/or federal law qualifications.

Your age? (Check only if applicable):

Under 14 can not apply. 14 - 15 time and job restrictions. _____

16 - 17 job restrictions. _____ 18+ for servers of alcohol. _____

21+ to make and serve alcohol. _____ Can you lift 60 lbs.? _____

Education:

Are you in school now? _____
If yes, where? _____ What level? _____
If no, what was the highest level of education _____.

Employment desired:

Position _____ Date you can start _____
Salary desired _____ Desired number of hours per week _____

Desired days and time of day you prefer to work _____
When can you not work? _____ Are you employed now? _____

If so can we inquire with your present employer? _____
Have you applied here before? If yes, when? and were you interviewed? _____

General Information:

Why did you apply here? _____

Name, address and phone number of person(s) to contact in case of an emergency.

You were referred by? _____

Is there any one you would like to list as a reference? Someone we would know or former employer would be helpful. Give name, address and phone number.

Former employers:

Please list your last two employers, with their name of business, address supervisor, date of employment, final salary, position and reason for leaving.

	Most recent	Previous
Business name	_____	_____
Address	_____	_____
Supervisor	_____	_____
Dates of employment	_____	_____
Salary	_____	_____
Position	_____	_____
Reason for leaving	_____	_____

The following information is requested by the Federal Government for certain types of loans, in order to monitor the lender's compliance with equal credit opportunity. You are not required to furnish this information, but are encouraged to do so. The law requires that a lender may neither discriminate on the basis of this information nor on whether you choose to furnish it. However, if you choose not to furnish it, under Federal regulations, this lender is required to note race/ethnicity on the basis of visual observation or surname. If you do not wish to furnish the above information, please check the box below.

I do not wish to furnish this information.

Ethnicity:

Hispanic or Latino

Not Hispanic or Latino

Race: (Mark one or more)

White Black or African American American Indian/Alaska Native

Asian Native Hawaiian or Pacific Islander

Gender: Male Female

Information provided by lender (or Management).

OFFICE USE ONLY: REMARKS

