

Clark Grain Co.

026 1st Street, P.O. Box 218 Johnson, NE 68378 402-868-3195

Employment Application

Applicant Information								
Full Name:					Date:			
	Last	First			M.I.			
Address:	0							
	Street Address					Apartment/Unit	#	
	City				Ctoto	ZIP Code		
	City				State			
Phone:		E	Email					
Date Availal	ole:		Desired Salary:\$					
Position Applied for:								
Are you a ci	tizen of the United States?	YES NO	If no, a	ire you	authorized to w	YES vork in the U.S.? □	NO	
Do you have a valid drivers license?		YES NO	D . OD.O			NO		
		Educ	ation					
High School	:	Address:						
From:	To:	Did you graduate?	YES	NO	Diploma::			
College: Address:								
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			
References								
Please list t	three professional referenc	es.						
Full Name:	ull Name: Relationship:							
Company:					PI	hone:		
Address:								

Full Name:		Relationship:
_		Phone:
Address:		
Full Name:		Relationship:
Company:		Phone:
Address:		
Р	revious Employment (list last three employers beginnir	ng with the most recent)
Company:		_ Phone:
Address:		
Job Title:	Starting Salary:	Ending Salary:\$
Responsibili	ities:	
From:		J:
May we con	YES NO tact your previous supervisor for a reference?	
Company:		Phone:
Address:		Phone:Supervisor:
Job Title:	Starting Salary:\$	
Responsibili	ities:	
From:	To: Reason for Leaving	
May we con	YES NO tact your previous supervisor for a reference? ☐ ☐	
Company:		Phone:
Address:		Supervisor:
Job Title:	Starting Salary:	Ending Salary:\$
Responsibili	ities:	
From:	To: Reason for Leaving	J:
May we con	YES NO tact your previous supervisor for a reference? ☐ ☐	

Disclaimer and Signature						
I certify that my answers are true and complete to the best of my knowledge.						
By signing below, I certify that if any answer or information is not true, accurate or c if hired, I may be discharged.	complete, I may not be hired, or					
Signature:	Date:					

SUBMIT TO: clarkgrain@clarkgraincompany.com