



APPLICATION FOR EMPLOYMENT

Landmark Implement is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

Name: _____ Date: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____ E-mail Address: _____

APPLICANT QUESTIONS:

Desired Position: _____ Salary desired: _____ Date Available: _____

If hired, can you provide documents required to establish your eligibility to work in the U.S.? Yes No

Are you 18 years of age or older? Yes No

How were you referred to Landmark Implement? _____

Have you ever been convicted of, entered into a diversion agreement for, or been subjected to a deferred sentencing regarding, an ordinance offense, misdemeanor or felony other than a minor traffic violation? Yes No

If yes, please explain in detail on the back of this application or separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age at time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

RECORD OF EMPLOYMENT:

List positions starting with most recent:

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

If this is a current employer, is Landmark Implement allowed to contact? Yes No

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

WORK-RELATED REFERENCES: (Do not include relatives)

	Name	Occupation	Years Known	Contact Information
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

EDUCATION:

High School or last grade completed:

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

College or Technical School

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

Other Schooling or Training

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____

Degree/Diploma: _____

MILITARY EXPERIENCE:

Branch of Service: _____ From: _____ To: _____

Rank/Type of Service: _____

Job-Related Training/Experience: _____

STATEMENT (Please read this statement carefully before signing this application):

I understand that employment with Landmark Implement is at-will, meaning that I or the Company may terminate my employment at any time, or for any or no reason that is not inconsistent with applicable state or federal law. I further understand that this is not an employment agreement and that no one, other than the CEO or his designee acting on his behalf has any authority to enter into any agreement for employment for any specified period of time and/or to make any agreement contrary to the foregoing.

I authorize Landmark Implement to conduct a thorough background investigation of my work and personal history, to include but not be limited to a criminal history background and credit check and verify all data given on this application and during interviews. I hereby release Landmark Implement, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that, upon being made a conditional offer of employment, Landmark Implement requires the successful completion of a drug and/or alcohol test as a continuing condition of employment.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant: _____ **Date Signed:** _____