Office: (435) 531-0040 Fax: (888) 487-6445

Email: nadine@renewedhoperanch.com



Employee Application

| Applicant Information | | | The state of the s | | |
|--|------------------|-----------------|--|---------------|--|
| Last Name | First | | MT | Date | |
| Street Address | | | Apartme | nt/Unit# | |
| City State | | Zip | | | |
| Phone E-mail | | | | | |
| Date Available Social Se | curity No. De | | Desired Salary | esired Salary | |
| Position Applied for | | - | Р | | |
| Are you legally eligible to work in the U.S.? Yes ☐ No ☐ | | | | | |
| Have you ever worked for this company? Yes 🗍 | No ☐ If yes, whe | yes, when? | | | |
| Have you ever been convicted of a felony? Yes | No ☐ If yes, exp | lain. | | | |
| | | | | | |
| Education | | | | | |
| High School | Address | ! | | | |
| From To Did you graduate? | Yes No No | Degree | | | |
| College | Address | 1 | | | |
| From To Did you graduate? | Yes □ No □ | Degree | | | |
| Other | Address | | | | |
| From To Did you graduate? | Yes ☐ No ☐ | Degree | | | |
| | | | | | |
| Employment History | | | rom | To : | |
| Company | Di | none # | *** | | |
| Address | | | | | |
| Supervisor " | , Re | esponsibilities | | | |
| May we contact? Yes No | | 1; | | То | |
| Company | ! p: | none# | | | |
| Address | | | | | |
| Supervisor | Re | esponsiblities | | | |
| May we contact? Yes ☐ No ☐ | | | From | То | |
| Company | | | riolli | 10 | |
| Address | | hone # | | | |
| Supervisor | R | esponsiblities | | | |
| May we contact? Yes ☐ No ☐ | | | | | |

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Employee Application

| References | |
|------------|--------------|
| Full Name | Relationship |
| Company | Phone # |
| Address | â |
| Full Name | Relationship |
| Company | Phone # |
| Address | * |
| Full Name | Relationship |
| Company | Phone ≑ |
| Address | |

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| | 1211121 | UIII. | 21411 | QLUI - |

I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.

l authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.

In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.

I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

| | | Committee of the second |
|-----------|------|-------------------------|
| Signature | Date | |