

Last Name	Date	
City	State	Zip Code
Mobile Phone	E-Mail	Zip Code
	City	City State

Are you over the age of 18? (If not, you may be required to provide authorization)

Would you be available to work overtime including weekends, if necessary?			YES	NO	
EMPLOYMEN	NT				
Attach a resur	me with your application <u>or</u> com	plete the sections below starti	ng with your m	ost recent	employer.
Employer 1	Employed From				
	Name of Company				
	Address				
	Phone Number				
	Position Held				
	Supervisor	Name:	Title:		
	Reason for Leaving				
	May we contact this employer?				
Employer 2	Employed From				
	Name of Company				
	Address				
	Phone Number				
	Position Held				
	Supervisor	Name:	Title:		
	Reason for Leaving				
	May we contact this employer?				
	Employed From				
	Name of Company				
Employer 3	Address				

Beloit

Phone Number
Position Held

3147 US Hwy 24 Beloit KS 67420 P 785.738.5733 F 785.738.3257



Osborne 1119 W Hwy 24 Osborne KS 67473 P 785.346.2112 F 785.346.5522

YES

NO



		SAVIN			
	Supervisor	Name:		Title:	
	Reason for Leaving			·	
	May we contact this emp	ployer?			
EDUCATION					
	ne with your applicatior	n <u>or</u> complete the se			
Type of Scho	ool School Name		Degree	Date Completed	GPA
REFERENCES					
	or 3 references. At least	2 must be a previou	ıs manager or sup	pervisor.	
Name	Company	•	Title	Phone Number	Ext.
		EQUAL OPPORTUI	NITY EMPLOYER		
•	al opportunity employer.	All employment is de	cided on the basis	of qualifications, merit, an	d business
need.	Δ DDI I	ICANT'S CERTIFICAT	ION AND AGREE	MENT	
I hereby certify application is s				that any misrepresentatio	n in the



Date

Signature of Applicant