



KANE BEEF EMPLOYMENT APPLICATION

Kane Beef ("Company"), is an equal opportunity employer and does not discriminate against qualified applicants or employees on account of race, color, religion, sex, age, national origin or disability. The Company prohibits any form of workplace harassment.

P E R S O N A L I N F O R M A T I O N	Last Name	First	Middle	Date
	Have you ever used another name for work, school or other purposes? If so, identify name(s) and dates used and circumstances.			Home Telephone ()
	Street Address			Work Telephone ()
	City, State, Zip			Salary Requested \$
	Social Security Number:		Position(s) Applied for: (1) _____ (2) _____	
	Have you ever previously been employed with this Company <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
	If employed: Month and Year _____		Reason for leaving: _____	
	What is your availability for work: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Other			
	If none of the above, what hours/days can you work? _____			
	Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No		May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If your application is considered favorably:		When can you begin work? _____ Are you left ____ or right ____ handed? (This information will not be considered to determine your eligibility for employment, but to assist the company in your placement following an offer of employment.)		
If hired, can you prove that you are authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of eligibility to work in the United States will be required before an individual can begin employment.)				
Are you able to perform the essential functions of the job for which you have applied? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Please state all languages (including English) that you speak, read and write proficiently:				
	Speak	Read	Write	Comments:
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

E D U C A T I O N	School	Name and Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Degree or Diploma
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business / Trade / Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Have you ever been terminated from employment or asked to resign by any employer? If yes, please provide employer, location, dates and describe circumstances. _____

The Company contacts prior employers to obtain references regarding work history, conduct and suitability for employment. May we contact your present employer at this time? Yes No (a reference will be required from current or most recent past employer before hiring).

SPECIALIZED SKILLS

List all specialized skills you possess and any machinery and/or equipment which you operate proficiently:

Skills

Machinery / Equipment

LICENSE / CERTIFICATION

Do you currently hold all professional or trade licenses or certifications required for the position for which you have applied? Yes No
If yes, provide license / certification and number, issuing state agency and expiration date: _____

Has your license or certification ever been denied, revoked, suspended or otherwise restricted? Yes No
If yes, please provide information on action, date, governmental authority and nature of action: _____

MOTOR VEHICLE RECORD

Please complete this section if you are applying for a position which includes driving a company or personal vehicle for work purposes.

Driver's License No. _____ Issuing State: _____ Expiration Date: _____

Type of License: Personal Commercial (CDL)

Has your driver's license ever been denied, limited, suspended or revoked? Yes No

If yes, provide complete information on action(s), date(s), location(s), and current status: _____

Have you had any moving violation during the past 7 years? Yes No

Have you been convicted for any driving offense during the past 7 years? Yes No

Have you pled guilty to any driving offense during the past 7 years? Yes No

Have you pled nolo contendere (no contest) to any driving offense during the past 7 years? Yes No

If you answered yes to any of the above questions, provide the offense(s), location (city/state), date(s) and disposition / current status: _____

Do you have automobile liability insurance? Yes No If yes, provide expiration date: _____

CRIMINAL HISTORY INFORMATION

You must include information on ALL convictions, pleas and alternative deferred adjudications that have occurred during your lifetime. Please disclose any criminal offense that may appear on your record, even if you are uncertain of the exact date or how a criminal offense was classified. State the approximate date, your understanding of the criminal classification, and note that you are unsure of more specific information.

Have you ever pled guilty to any criminal offense (misdemeanor or felony) other than parking tickets? Yes No

Have you ever pled nolo contendere (no contest) to any criminal offense (misdemeanor or felony) other than parking tickets? Yes No

Have you ever been arrested for allegedly committing any criminal offense (misdemeanor or felony) other than parking tickets? Yes No

If you answered "yes" to any of these questions, provide complete information on all criminal offense(s), date(s), locations(s) (city / county and state) and disposition:

Offense	Date	Location	Disposition

(use additional sheets if necessary)

Have you served community-based punishment for any criminal offense? Yes No

Conviction of a crime is not an automatic bar to consideration for employment or continued employment. Factors such as the date of the offense, the time period between the offense and the present, the nature and seriousness of the offense, and rehabilitation will be considered by the Company.

PERSONAL / EMPLOYMENT REFERENCES

Name	Phone Number	Best Time to Call	Relationship to You
1.			
2.			
3.			

ADDITIONAL INFORMATION

Provide any additional information you believe will assist the Company in considering your application, including membership in professional or civil organizations, specialized training, apprenticeships or other qualifications.

APPLICATION PROCESS

Applications for employment will be actively considered for the positions listed for 90 days after submission to the Company. Applicants desiring to be considered for other positions or after this time period has expired should submit another application. The Company may not interview all applicants for a vacancy. Those applicants to be interviewed will be contacted by the Company.

APPLICANT VERIFICATION

I certify that all of the information provided on this employment application and all exhibits and resumés submitted to the Company is true, correct and complete. I understand that false, misleading, incomplete or omitted information on this application or exhibits and resumés submitted to the Company will result in rejection of this application or termination, if hired, regardless of the date of discovery. I authorize all persons and organizations, including but not limited to my former and present employers and personal references, to provide the Company and its agents with complete information they may have concerning my character, employment record and suitability for employment with the Company. I understand that this authorization to obtain background information does not include a consumer report under the federal Fair Credit Reporting Act. I understand that if the Company desires to conduct a consumer report or background check about me under the federal Fair Credit Reporting Act, I will receive a separate notice and authorization for that report.

I understand that this application is not an offer of employment or a contract with the Company. I understand that employment with the Company is "at will" and based on mutual consent. Either the Company or I can terminate any employment relationship, with or without prior notice or cause. I understand that no employee of the Company, other than the President, is authorized to enter into any contract or create any employment relationship other than "at will."

I understand that if I am hired by the Company I will be required to complete a Federal I-9 form and provide documentation verifying my right to live and work in the United States.

Any conditional employment offer by the Company is subject to my successful completion of all employment prerequisites, including but not limited to verifying employment and professional / personal references, verifying licensure and drug testing, criminal background checks and conducting a driving record check (where appropriate).

If employed, I will comply with all of the Company's policies, rules and procedures.

_____ Date

_____ Applicant Signature