Welcome Dairy, LLC H4489 Maple Rd Colby, WI 54421

EMPLOYMENT APPLICATION

This Company is an equal opportunity employer and fully subscribes to the principles of Equal Employment Opportunity. It is the policy of this company to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status or disability, or any other basis prohibited by federal or state law. As an equal opportunity employer, this company intends to comply fully with all federal and state laws. The information requested on this application will not be used for any purpose prohibited by law. Disabled applicants may request any needed accommodation.

Date:					
Name:		First		Mid	ddle
Address: No.	Street		City	State	Zip
Home Phone: _		(Cell Phone:		
Have you been	previously employed by t	his company? () Ye	s () No		
If Yes, When:			If Yes, In what capacity?		
Who Referred	you to this company: ()	Our Advertisement () Job Service () Fri	end/Relative () No C	ne
EMPLOYME	NT DESIRED:				
Position(s) Applied for				() Full Time () Pa	art Time
If Part time, wh	nat days and hours are you	available:			
Date Available to Start			Salary Requirement		
Are you a Unit	ed States citizen or do you	have an entry permit w	hich allows you to lawfo	ully work in the U.S.()	Yes () No
Are vou at leas	et 18 years old? () Yes	() No			
	convicted of a felony with a f				
	Name and Location Of School	No. Years Completed	Graduate? <u>(Y) (N)</u>	Course of Study	Degree <u>Received</u>
High School					
College				·	_
Other					

		_				
ist any special skills or qualifications which you feel are relevant to the job for which you are applying:						
MILITARY:						
Branch	What were your duties					
Did you receive any specialized	training?					
If Yes, Describe						
EMPLOYMENT HISTORY:	(Please give accurate and complete information. Start with present or most recent employer:					
1. Company Name Telephone No Address						
Employed fromName of Supervisor	- to -					
Pay Starting Pay Ending or Current Pay	per()Hour()Weekly()Biweekly()Semi-Monthly() Monthly per()Hour()Weekly()Biweekly()Semi-Monthly() Monthly					
Positions and Responsibilities						
Reason for Leaving.						
2. Company Name		_				
Telephone No.						
Address	- to -					
Name of Supervisor.						
Pay Starting Pay	per ()Hour ()Weekly ()Biweekly ()Semi-Monthly () Monthly					
Ending or Current Pay	per ()Hour ()Weekly ()Biweekly ()Semi-Monthly () Monthly					
Positions and Responsibilities						
Reason for Leaving.						
3 Company Name						
Telephone No.						
Employed from	- to -					
Name of Supervisor.						
Pay Starting Pay	per()Hour()Weekly()Biweekly()Semi-Monthly() Monthly					
Ending or Current Pay						
Positions and Responsibilities						
Reason for Leaving.						

Name	Address	Phone	
Name	Address	Phone	
Name	Address	Phone	
:	Please read the following statements care	efully before you sign your name.	
HEREBY CERTIFY	that the answers given by me to the above	questions and statements are true and correct and I	hereby
uthorize you to contact refer	ences, past or present employers, persons	, schools, law enforcement agencies and any other s	sources of
nformation which may be rel	evant to my application for employment.	It is understood and agreed that any misrepresenta	ation, false
tatement, or omissions by mo	e in this Application will be sufficient reas	son for rejection of my application or for dismissal a	at any time
uring my employment, with	out liability to this Company. This include	es furnishing a false name or social security number	r. I have
ead, understand and agree to	the above statement. Please initial here _		
further understand that no re	epresentative of the Company has the auth	ority to enter into any agreement for employment for	or any
pecified period of time and t	hat this Company is not guaranteeing emp	oloyment for anyone. No employment contract is cr	eated by
irtue of my being hired by th	nis Company, and if hired, my employmen	at will be at will and may be terminated at any time	without
rior notice. I have read, und	erstand and agree to the statement of this p	paragraph. (Please initial here)	
understand that this applicat	ion will remain on file for 30 days for con	sideration. After 30 days, if I am still interested in	a position
ith this Company, it will be	necessary for me to complete a new application	cation form.	