



LOREN COOK COMPANY

Corporate Offices
2015 E. Dale Street • Springfield, MO 65803-4637
Manufacturing Plants
Springfield, Missouri • Asheville, North Carolina

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

DATE _____

NAME _____ SOC. SEC. NO. _____
LAST FIRST MIDDLE

ADDRESS _____
STREET CITY STATE ZIP

HOME PHONE NO. _____
ARE YOU LEGALLY ABLE TO WORK IN U.S.? YES NO
ARE YOU 18 YEARS OR OLDER? YES NO

CELL PHONE NO. _____ WHO REFERRED YOU TO US? _____

WERE YOU PREVIOUSLY EMPLOYED BY THIS COMPANY? ~~YES~~ NO IF YES, WHEN? _____

EMPLOYMENT DESIRED

POSITION _____ DATE YOU CAN START _____ SALARY DESIRED _____

ARE YOU EMPLOYED NOW? ~~YES~~ NO

WHAT SHIFTS ARE YOU AVAILABLE TO WORK? _____ 1st 2nd 3rd

WHAT SHIFT WOULD YOU PREFER? _____ 1st 2nd 3rd

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?
HIGH SCHOOL	_____	_____	_____
	_____	_____	_____
COLLEGE	_____	_____	_____
	_____	_____	_____

TRADE SCHOOL OR OTHER SPECIAL TRAINING _____

WERE YOU IN THE U.S. ARMED FORCES? YES NO NUMBER OF YEARS OF SERVICE _____

LIST ANY SPECIAL SERVICE TRAINING _____ RANK AT DISCHARGE _____

DESCRIBE ANY SKILLS OR QUALIFICATIONS WHICH YOU FEEL WOULD BE HELPFUL TO THE COMPANY _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO IF YES, PLEASE EXPLAIN NATURE OF FELONY _____

PLEASE TURN OVER!!!

EMPLOYMENT HISTORY

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT

(If you worked under a different name, please indicate that name _____)

EMPLOYER'S NAME	ADDRESS & CITY	DATES WORKED	DESCRIBE WORK YOU DID	REASON FOR LEAVING	PAY RATE	WHO SHOULD WE CONTACT & PHONE NO.
1.		From _____ (mm/yy) To _____ (mm/yy)				
2.		From _____ (mm/yy) To _____ (mm/yy)				
3.		From _____ (mm/yy) To _____ (mm/yy)				
4.		From _____ (mm/yy) To _____ (mm/yy)				
5.		From _____ (mm/yy) To _____ (mm/yy)				
6.		From _____ (mm/yy) To _____ (mm/yy)				

IS THERE ANY REASON WE SHOULD NOT CONTACT A FORMER EMPLOYER? YES _____ NO _____

PERSONAL REFERENCES:

NAMES OF INDIVIDUALS WHOM WE MAY CONTACT FOR PERSONAL REFERENCE:

NAME: _____ TELEPHONE: _____

NAME: _____ TELEPHONE: _____

NAME: _____ TELEPHONE: _____

NAMES OF RELATIVES AND FRIENDS WHO ARE WORKING FOR THE COMPANY:

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, untrue or incomplete statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. In consideration of my employment, I agree to conform to the rules and regulations of Loren Cook Company, and my employment and compensation can be terminated with or without cause, and with or without notice at anytime, at the option of either the Company or myself. I understand that no representative of the Company, other than the President of the Company, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing."

DATE _____ SIGNATURE _____