



APPLICATION FOR EMPLOYMENT

309 MERCHANT ST., EMPORIA, KS 66801 | 620-343-7000

EVCO is an equal opportunity employer and will not discriminate against any applicant on the basis of any characteristic that is protected by state or federal law. EVCO is an "AT-WILL" employer.

APPLICANT INFORMATION

Position Applied for _____

Date of Application _____ Available Start Date _____

Name _____ Social Security No. _____
Last First MI

Present Address _____
Street City State Zip

Alternate Address _____
Street City State Zip

Home Phone _____ Mobile Phone _____

Email _____

Are you 18 years or older? Yes No Date of Birth _____

Federal & Kansas law prohibits unlawful employment discrimination on the basis of age with respect to individuals who are at least 40 years of age.

Are you a citizen of the United States? Yes No

If no, are you lawfully authorized to work in the United States? Yes No N/A

How did you learn about EVCO? Online Newspaper Radio Word of Mouth

EVCO Employee _____ Other _____
Name

Type of Employment? Full Time Part Time Rate of Pay Desired _____ per hour

Are you employed now? Yes No May we contact your present employer? Yes No N/A

Why do you want to change employment? _____

Have you previously been employed by EVCO? Yes No If yes, when? _____

BACKGROUND

Have you ever been accused, convicted, plead guilty or "No Contest" to, or been granted diversion, relating to any crime? Yes No

If so, please state citation, date and place where the offense occurred. _____

A criminal record will not necessarily be a bar to employment, and factors such as age and the time, seriousness and nature of the offense, and your rehabilitation will be considered in the hiring decision. You may exclude traffic offenses of a minor nature, but must include DUI/DWI offenses.

EDUCATION

	Name and Location	Years Attended	Did you Graduate?	Subject/Major
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Specialized Training			<input type="checkbox"/> Yes <input type="checkbox"/> No	

PERSONAL REFERENCES

List two individuals ***not related to or living with you***, whom you have known for at least one year.

Name

Name

Address

Phone#

Address

Phone#

Relationship

Years Acquainted

Relationship

Years Acquainted

EMPLOYMENT HISTORY

(most recent first)

Date	Name, Address, Phone#	Salary	Position & Responsibilities	Reason for Leaving
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		
From ____ / ____ Month Year To ____ / ____ Month Year		Starting		
		Ending		

FOR EMPLOYER USE ONLY

Interviewed By _____ Date _____ Pre-employment Date _____

Hired Yes No Starting Date _____ Position _____ Wages _____

READ CAREFULLY BEFORE SIGNING

By signing and submitting this application for employment to EVCO, I have read, clearly understand, certify and otherwise agree as follows:

(1) I certify that the information contained in this application is correct and complete to the best of my knowledge and understand that any omission, misrepresentation or falsification of information made herein or in any interviews will result in the refusal to employ me or my dismissal if discovered after I am employed;

(2) I authorize the references, schools and current and past employers I have listed to give EVCO any and all information concerning my previous employment and any information they may have, personal or otherwise, and I release all parties from all liability for any damages or claims that may result from furnishing information about me to the Company;

(3) If I am employed, I will abide by the rules, regulations and policies of EVCO;

(4) I understand that my employment is “**AT-WILL**,” which means that if I am hired, my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself;

(5) I understand that no representative of EVCO, other than the President of the Company, has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing.

By submitting electronically, I agree that this electronic signature has the same legal effect and will be enforced the same as a written signature.

By submitting an incomplete application, I realize that I will not be considered for employment.

Applicant Signature

Date

If submitting this application electronically, please email hr@evcofoods.com, and include in the subject line “Last name, First name Application” Example: Smith, John Application.