

CADY CHEESE, LLC.
Employment Application
 An Equal Opportunity Employer
Drug Screens Required

Position Applied for		Date	
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APPLICANT INFORMATION

Last Name		First		M.I.	Maiden				
Street Address				Apartment/Unit #					
City			State			ZIP			
Phone			Cell/Work						
E-Mail Address				Are you 18 years or older? YES <input type="checkbox"/> NO <input type="checkbox"/>					
Social Security #			Date Available			Desired Salary			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain						
Have you been known by any other name?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, what name?						
Hours per week you would like to work? _____ Full-Time (>32 hours per week) Part Time (< 32 hours per week) Casual, On-Call									
Hours Available (check all that you are able/willing to work)			Days Available (check all that you are able/willing to work)						
Days <input type="checkbox"/>	Evening <input type="checkbox"/>	Night <input type="checkbox"/>	Sun <input type="checkbox"/>	Mon <input type="checkbox"/>	Tue <input type="checkbox"/>	Wed <input type="checkbox"/>	Thurs <input type="checkbox"/>	Fri <input type="checkbox"/>	Sat <input type="checkbox"/>
Who referred you to Cady Cheese?									
Have you ever been employed by Cady Cheese?			Yes <input type="checkbox"/> NO <input type="checkbox"/> DATES EMPLOYED:						

If Yes, Position Held:

EDUCATION

High School		Address				
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/Area of Study			
College			Address			
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/Area of Study			
Other			Address			
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree/Area of Study			

REFERENCES

Please list two professional references.

Full Name		Relationship		
Company			Phone	()
Full Name		Relationship		
Company			Phone	()

PREVIOUS EMPLOYMENT

Company				Phone	()	
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		

Company				Phone	()	
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		

Company				Phone	()	
Address				Supervisor		
Job Title			Starting Salary	\$	Ending Salary	\$
Responsibilities						
From		To		Reason for Leaving		
May we contact your previous supervisor for a reference?			YES <input type="checkbox"/>	NO <input type="checkbox"/>		

JOB RESTRICTIONS
 Do you have any current job restrictions that will interfere with the job requirements of the job for which you are applying for?
 YES NO If yes, what restrictions?

MILITARY SERVICE

Branch				From		To	
Rank at Discharge				Type of Discharge			
If other than honorable, explain							

DISCLAIMER AND SIGNATURE

I certify that the information provided on this application is true and complete. I agree that if there is any misrepresentation or omission concerning the information on this application, any offer of employment to me may be withdrawn, and if I have already been hired, my employment terminated.

No promises concerning the nature or length of my employment have been made to me. If I am hired, I understand that I have the right to terminate my employment at any time, and for any reason. I also understand that Cady Cheese, LLC. has the right to terminate my employment at any time and for any reason.

I authorize Cady Cheese, LLC. and its representatives to make an investigation of my past employment, criminal history and credit. I authorize any past or present employer to release information concerning my employment to Cady Cheese, LLC. I hereby release all persons and past and present employers from any liability to me if they supply information to Cady Cheese, LLC. as part of its investigation.

My signature reflects that I have read, understood and have agreed to these terms and conditions.

Signature				Date		
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Applicant
Equal Employment Opportunity Survey
Cady Cheese, LLC, Wilson, WI

This voluntary survey is used for the purposes of accurately reporting to the U.S. Equal Employment Opportunity Commission. No reprisals will be made against you if you choose to not complete the survey. Also, no reprisals will be made against you because of your gender, race or ethnic category or physical or mental disability. All information will be kept confidential. If you choose to not complete the survey, please sign the declination at the bottom of this form.

Your name: _____

1. Please check (✓) your gender: Male Female
2. Do you have a physical or mental disability? Yes No
2. Are you a veteran of any US military? Yes No
3. Are you Hispanic or Latino? Yes No
(Definition: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)
4. If your answer to Question 3 was “No”, please identify your race, choosing one of the following choices:
 - White (NOT Hispanic or Latino).
 - Black or African American (NOT Hispanic or Latino), A person having origins in any of the Black racial groups of Africa.
 - Native Hawaiian or Pacific Islander (NOT Hispanic or Latino). A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
 - Asian (NOT Hispanic or Latino). A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
 - American Indian or Alaskan Native (NOT Hispanic or Latino). A person having origins in any of the original peoples of North and South American (including Central America), and who maintains tribal affiliation or community attachment.
 - Two or more races (NOT Hispanic or Latino). All persons who identify with more than one of the above five races.

DECLINATION:
I have read the survey, and have chosen to not complete it.

Signature: _____

Date: _____