

FORMER EMPLOYERS (LAST FIVE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST)

DATES MO & YR	NAME & ADDRESS OF EMPLOYER	SALARY/ WAGE	POSITION	SUPERVISOR	REASON FOR LEAVING
FROM _____	_____	_____	_____	_____	_____
TO _____	_____	_____	PHONE NUMBER: _____	_____	_____
FROM _____	_____	_____	_____	_____	_____
TO _____	_____	_____	PHONE NUMBER: _____	_____	_____
FROM _____	_____	_____	_____	_____	_____
TO _____	_____	_____	PHONE NUMBER: _____	_____	_____
FROM _____	_____	_____	_____	_____	_____
TO _____	_____	_____	PHONE NUMBER: _____	_____	_____

REFERENCES: GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST THREE YEARS.

NAME	ADDRESS	PHONE #	OCCUPATION	YEARS KNOWN
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

IN CASE OF EMERGENCY NOTIFY:

NAME _____

ADDRESS _____

PHONE _____

I AUTHORIZE ROOTABAGA COUNTRY FARM/SAMISH BAY CHEESE TO OBTAIN INFORMATION ABOUT ME FROM PREVIOUS EMPLOYERS, SCHOOLS, GOVERNMENT AGENCIES, AND CREDIT SOURCES. I VERIFY THAT THE STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE AND COMPLETE. I UNDERSTAND THAT IF I AM HIRED, ANY FALSE OR INCOMPLETE STATEMENTS IN THIS APPLICATION WILL BE GROUNDS FOR IMMEDIATE DISCHARGE. FURTHER, I ACKNOWLEDGE THAT IF HIRED, I WILL BE AN AT WILL EMPLOYEE. I UNDERSTAND THAT NO REPRESENTATIVE OF THE COMPANY OTHER THAN THE OWNERS HAVE AUTHORITY TO CHANGE THE TERMS OF AN AT WILL EMPLOYMENT AND THAT ANY SUCH CHANGE CAN OCCUR ONLY IN A WRITTEN EMPLOYMENT CONTRACT.

DATE _____ SIGNATURE _____