



# Haverkamp Brothers Inc.

## EMPLOYMENT APPLICATION FORM

Please mail or bring in person to:

Haverkamp Brothers Inc.  
2964 L4 Road  
Bern, Kansas 66408  
Phone: 785-858-4457  
Fax: 785-858-4717

or

Spring Creek  
2456 280<sup>th</sup> Street  
Robinson KS 66532  
Phone: 785-544-7760  
Fax: 785-544-7762

DATE \_\_\_\_\_

### PERSONAL INFORMATION

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
 (last) (First) (Middle)  
 Present Address \_\_\_\_\_  
 \_\_\_\_\_ (City) (State) (Zip Code)  
 How long at current address? \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Are you 18 years or older? \_\_\_\_\_ Are you legally eligible for employment in the United States?  
 \_\_\_\_\_

### DESIRED EMPLOYMENT

Position Desired \_\_\_\_\_ Pay Expected \_\_\_\_\_  
 How many hours can you work weekly? \_\_\_\_\_ When are you able to start work? \_\_\_\_\_  
 Are you now employed? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

### EDUCATION

School Level	Name & Location	No. of Years Attended	Did you Graduate?	Degree or Diploma
Elementary				
High School				
College				

<b>Business/Trade/ Technical</b>				
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Have you ever been convicted of a crime which is substantially related to the functions or qualifications of the job which you are applying? \_\_\_\_\_ Is yes, describe in full \_\_\_\_\_

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### Application for Employment

#### DRIVER'S LICENSE

Do you have a Driver's License? \_\_\_\_\_ Driver's License  
Number \_\_\_\_\_  
State of Issue? \_\_\_\_\_

Have you had any accidents in the last three years? \_\_\_\_\_ How  
many? \_\_\_\_\_  
Have you had any moving violations in the last three years? \_\_\_\_\_ How  
many? \_\_\_\_\_

#### PLEASE LIST TWO REFERENCES OTHER THAN RELATIVES:

Name: _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
_____	_____
Telephone _____	Telephone _____

#### MILITARY

Have you ever been in the armed forces? \_\_\_\_\_ Are you now a member of the National Guard? \_\_\_\_\_

**EMPLOYMENT** (please give accurate complete full-time and part-time employment record. Start with you present or most recent employer.)

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Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Weekly pay: Start \_\_\_\_\_ ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

State job title and describe your work, skills used, duties performed, advancements or promotions you received \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Weekly pay: Start \_\_\_\_\_ ending \_\_\_\_\_

Reason for leaving \_\_\_\_\_

State job title and describe your work, skills used, duties performed, advancements or promotions you received \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employed  
from \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Weekly pay:  
Start \_\_\_\_\_ ending \_\_\_\_\_

Reason for  
leaving \_\_\_\_\_

State job title and describe your work, skills used, duties performed, advancements or  
promotions you  
received \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company  
Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employed  
from \_\_\_\_\_ to \_\_\_\_\_

Name of Supervisor \_\_\_\_\_ Weekly pay:  
Start \_\_\_\_\_ ending \_\_\_\_\_

Reason for  
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State job title and describe your work, skills used, duties performed, advancements or  
promotions you  
received \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Application for Employment

**AUTHORIZATION**

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative 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, unless it is in writing and signed by an authorized company representation.”

\_\_\_\_\_

(signature)

(date)

Haverkamp Brothers Inc. is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with Haverkamp Brothers Inc. depends solely on your qualifications.

Thank you for completing this application form  
and for your interest in our business.

### **Haverkamp Brothers Inc.**



Robert, Mark, Alan, Leon  
2964 L4 Road  
Bern Kansas 66408  
Phone: 785-858-4457  
Fax: 785-858-4717

#### OFFICE USE ONLY

Interviewed \_\_\_\_\_

Hire \_\_\_\_\_

Start Date \_\_\_\_\_

Starting wage \_\_\_\_\_

File for future use \_\_\_\_\_

Other \_\_\_\_\_