



P.O. Box 485
Broken Bow, NE 68822

Office (308) 872-6494
Fax (308) 872-6498
Email employment@adamslandandcattle.com

An Equal Opportunity Employer
Application for Employment

This application for employment will not be considered unless fully completed

GENERAL INFORMATION

Date of Application	Social Security Number	Date Available
Last Name	First Name	Middle Initial
Street Address		
City	State	Zip
Telephone Number	Alternate Number (Optional)	Email Address (Optional)

Yes No If Yes: _____
 Have you ever been employed by ALCC? (If yes, must also complete all details under employment record section)

 Dates of Employment Name employed under if now different

_____ List relatives employed by ALCC, their relationship and where they work

_____ Referred By

Do you have a Valid Drivers License Yes No
 Drivers License Number _____ State _____

_____ List all positions for which you would like to be considered _____ Date Available

_____ Rate of pay Expected _____ Type of employment you are seeking?

Full Time Part Time Temporary (6 months or less)

Availability - To help us consider you for a job that matches your availability, please tell us the earliest time and the latest time you can work each day

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Earliest Time							
Latest Time							

Check if you are available to work:

Days	Evenings	Nights	Saturdays	Sundays	Extended Hours

Yes No Are you at least 16 years of age?

The Age Discrimination of Employment Act of 1967 as amended prohibits discrimination of age with respect to individuals who are at least 40 years of age. Federal law prohibits employing persons 16 and 17 years of age in certain high-risk positions.

GENERAL INFORMATION (continued)

Can you submit verification of your legal right to work in the United States It is the intention of Adams Land & Cattle Co. to hire only individuals legally eligible to work in the United States
 Yes No

United States Citizenship If not U.S.,
 Yes No Visa Type Date Granted Immigrant Number

EDUCATIONAL & TRAINING RECORD

Please check the highest level completed

Elementary
 1 2 3 4 5 6 7 8

High School College
 9 10 11 12 1 2 3 4 More than 4

Are you currently a student?
 Yes No

Name and Location of College, University or Vo-tech Institution attended	Credit hours Completed	Major or Specialty	Certificate/Degree Received	Dates Attended

SKILLS & EXPERIENCE

Please list any skills and abilities you wish to be considered and that could be valuable to this job. Include skills with equipment or machines you operate, special computer knowledge, feedlot experience, truck driving ability, farming experience, etc.

Please check highest level	None	Minimal (0 -1year)	Average (1 - 4 years)	Above Average (4 - 8 years)	Extensive (8 + years)
Supervisory					
Clerical					
Accounting Skills					
Computer Experience					
Farming					
Feeding					
Processing					
Cattle Doctoring					
Pen Checking/Cattle Movement					
Heavy Equipment					
Fencing					
Shop/Mechanical					

EMPLOYMENT RECORD

Employment History - List entire employment history, starting with your present employer. Include U.S. Armed Forces experiences. Account for all time during the past 10 years, including periods of unemployment. For any unemployment or self-employed periods show dates and location. Include any unpaid work experience. Resumes are acceptable but may NOT be substituted for the following information. **Attach additional sheets if necessary.**

Are you currently employed If currently employed, may we contact your employer?
 Yes No Yes No

Company Name		Address	
City	State	Zip	Telephone Number
Job Title	From: _____ To: _____	Full time or Part Time	
Starting Rate of Pay	Ending Rate of Pay	Reason For Leaving	
Supervisors Name		Your Name if Different than Present	
Primary Duties/Responsibilities			

Company Name		Address	
City	State	Zip	Telephone Number
Job Title	From: _____ To: _____	Full time or Part Time	
Starting Rate of Pay	Ending Rate of Pay	Reason For Leaving	
Supervisors Name		Your Name if Different than Present	
Primary Duties/Responsibilities			

Company Name		Address	
City	State	Zip	Telephone Number
Job Title	From: _____ To: _____	Full time or Part Time	
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Supervisors Name		Your Name if Different than Present	
Primary Duties/Responsibilities			

Company Name		Address	
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Company Name		Address	
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Job Title	From: _____ To: _____	Dates of Employment	
Starting Rate of Pay	Ending Rate of Pay	Reason For Leaving	
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Primary Duties/Responsibilities			

List three (3) people (no relatives) you have worked with that we may contact for a reference if necessary.

Name	Company	Phone Number
Name	Company	Phone Number
Name	Company	Phone Number

Have you ever been convicted of a Felony?			Have you ever been convicted of any type of theft, fraud or a violent crime?		
	Yes	No		Yes	No

If yes, on a separate sheet, identify the crime for which you were convicted, the date of the conviction and the location of the court in which you were convicted. Please provide any details you feel are relevant. Conviction of a crime will not automatically disqualify you from consideration for employment, but will be considered as part of an overall evaluation of your qualifications.

IMPORTANT

We are glad you are interested in joining the Adams Land & Cattle Co. team. Please read the following statement carefully before you sign and return this application.

Adams Land & Cattle Co. in considering my application for employment, may verify the information set forth on this application and obtain additional background information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus and law enforcement agencies to supply any information concerning my background. I have read, understand and agree to this statement. (Please Initial here)_____.

I understand that Adams Land & Cattle Co. has a commitment to maintain an alcohol/drug-free workplace and that Adams Land & Cattle Co. requires a drug screening test as part of its selection and hiring process. I agree to submit to a pre-placement alcohol and drug test screen and recognize employment is contingent upon successfully passing the alcohol and drug test. I further understand and agree that if I am employed, I may be required to submit to alcohol/drug-testing under certain circumstances during my employment. I further agree that if I have been convicted of a crime, the authorities of Adams Land & Cattle Co., may obtain the details of my conviction to determine its relationship to the position I am applying for as a condition of my employment. (Please initial here)_____.

I certify that the information on this application is correct and I understand that any misrepresentation or omission of any information will result in my disqualification from consideration for employment or, if employed, my dismissal regardless of when discovered. I understand that this application is not a contract, offer, or promise of employment and that if hired, I will be able to resign at any time for any reason. Likewise, the company can terminate my employment at any time with or without cause, unless otherwise required by law. I further understand that no one other than the President of Adams Land & Cattle Co., has the authority to enter into an employment contract or agreement with me, and that my at-will employment can be changed only by a written agreement signed by the President of Adams Land & Cattle Co. I have read, understand and agree to this statement. (Please initial here)_____.

Signature as shown on Social Security Card

Date

Federal law requires evidence of identity and employment eligibility upon hire.

EEO VOLUNTARY INFORMATION

(completion of information below is voluntary)

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purpose. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting, and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is STRICTLY VOLUNTARY. Failure to provide it will not subject you to any adverse personnel decision or action. your cooperation is appreciated.

Please be advised that this survey is NOT a part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations.

Please Print

Positions(s) applied for		Date
Referral Source - please check		
<input type="checkbox"/>	Walk-in	<input type="checkbox"/>
<input type="checkbox"/>	Employee	<input type="checkbox"/>
<input type="checkbox"/>	Advertisement-Source	<input type="checkbox"/>
	<input type="checkbox"/>	Government Employment Agency
	<input type="checkbox"/>	Private Employment Agency
	<input type="checkbox"/>	Relative
	<input type="checkbox"/>	School
	<input type="checkbox"/>	Other
Name of person who referred you (If Applicable)		

APPLICANT INFORMATION

Last Name	First Name	Middle Initial
Street Address		
City	State	Zip
		<input type="checkbox"/>
Telephone Number		Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

<input type="checkbox"/> White (not of Hispanic Origin) <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black (Not of Hispanic Origin) <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Multiracial (Having parents of different races). (This identification group is recognized only in the state of Michigan) <input type="checkbox"/> Other
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