



1150 HWY 425
Rayville, LA 71269
318-728-6423

5733 HWY 17
Delhi, LA 71269
318-878-3751

Application for Employment

Equal Opportunity Employer

Revision Date: 06/20/2012

Today's Date is:		The date you are available:	
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Personal and General Information:		
Last Name	First Name	Middle Name
Street Address		
City	State	Zip
Home Phone	Cell Phone	Other Phone

Emergency Contact Information:		
Last Name	First	Middle
Street Address		
City	State	Zip
Home Phone	Cell Phone	Other Phone

1. If employed and under 18, can you furnish a work permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you prevented from lawfully becoming employed in this country because of VISA or immigration status?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you been convicted of a felony? (if "YES" is answered it will not reflect on your consideration for employment)	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes please explain:	

4. Have you been employed by Delta Ridge Implement, INC?		<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Do you know an employee currently working for Delta Ridge Implement, INC?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please list:		
6. May we contact your prior employer?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide contact information:		
7. Type of work desired:		
8. Salary desired:		
9. If applying for a position where driving is required can you provide valid Driver's license for the State of Louisiana?		
10. Are you available to work:		Full Time Part Time

High School		
Name of School		
Street Address		
City	State	Zip
Last Year Attended:	<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior	
Did you Graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

College		
Name of School		
Street Address		
City	State	Zip
Last Year Attended:	<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior	
Did you Graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Previous Employment		
Employer	Supervisor's Name	
Street Address		
City	State	Zip
Telephone Number	Employed From (date)	Employed to (date)
Starting Salary	Ending Salary	Duties
What did you like about your job?		
May we contact for references?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Employment		
Employer	Supervisor's Name	
Street Address		
City	State	Zip
Telephone Number	Employed From (date)	Employed to (date)
Starting Salary	Ending Salary	Duties
What did you like about your job?		
May we contact for references?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Employment		
Employer		Supervisor's Name
Street Address		
City	State	Zip
Telephone Number	Employed From (date)	Employed to (date)
Starting Salary	Ending Salary	Duties
What did you like about your job?		
May we contact for references?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Employment		
Employer		Supervisor's Name
Street Address		
City	State	Zip
Telephone Number	Employed From (date)	Employed to (date)
Starting Salary	Ending Salary	Duties
What did you like about your job?		
May we contact for references?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Previous Employment		
Employer		Supervisor's Name
Street Address		
City	State	Zip
Telephone Number	Employed From (date)	Employed to (date)
Starting Salary	Ending Salary	Duties
What did you like about your job?		
May we contact for references?		<input type="checkbox"/> Yes <input type="checkbox"/> No

Authorization			
<p>“I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.</p> <p>In consideration of my employment, I agree to conform to the company’s rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company’s option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the company. I understand that no company representative, other than its president, vice president or corporate secretary ;and then only when in writing and signed by the president, vice president or corporate secretary has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing”</p> <p>I have read, understand, and agree with the above.</p> <table border="1"><tr><td>Signature of Applicant</td><td>Date</td></tr></table>		Signature of Applicant	Date
Signature of Applicant	Date		