

Wenninghoff Inc Job Application

___ Seasonal (Dates available for work _____ through _____)

Which do you prefer? Field Work _____ Farm Sales _____ Farmer's Markets _____

Describe your availability as to days of the week, am or pm shifts, time needed off, school schedule, sports schedule, etc. _____

Name: _____
Last First M.I.

Address: _____
Street City State Zip

Phone #: _____ **In case of emergency #** _____

In case of an emergency, name of who we can contact _____

Please indicate either yes (Y) or no (N) for each question:

Are you under 18? (Y N) Do you have the legal right to live and work in the United States? ((Y N)

Do you have a valid Driver's license? (Y N) **Driver's License Number:** _____

Do you suffer from allergies? (Y N) **Do you suffer back problems?** (Y N)

Can you lift at least 50 pounds(full bushels) (Y N)

Education/Training:

Indicate the last year of education completed:

Still in High school: (Grade just completed _____) College graduate: _____
 High school Graduate or GED _____ College: (Years completed _____)

Currently enrolled in a College/University/Tech school? Y N If so, Name of school _____

Degrees, coursework or other relevant education/training: _____

Equipment (Check level of skill):

Store (Check level of skill):

	Some experience	Skilled		Some experience	Skilled
Farm Tractors			Cash register		
Tractors w/ Front End Loaders			Flower knowledge		
Sprayers			Canning		
Fork Lift			Baking		
Maintaining/Repairing equipment					

Do you have experience handling money? (Y N) If yes, please describe that experience:

Do you have experience with planting, weeding and harvesting fruits and vegetables? (Y N) If yes, please describe that experience: _____

Please list names and phone numbers of two references:

1. _____
Name Phone Number
2. _____
Name Phone Number

List all past employment or volunteer work experience which you feel would add to your qualifications for this job. (If necessary attach additional pages)

A. Job title _____ Dates employed: From _____ to _____
Employer _____ Hours worked per week _____
City _____ State _____ Phone number (____) ____ - _____
Reason for leaving _____
Supervisor's name _____
Equipment used if any _____
Description of duties _____

B. Job title _____ Dates employed: From _____ to _____
Employer _____ Hours worked per week _____
City _____ State _____ Phone number (____) ____ - _____
Reason for leaving _____
Supervisor's name _____
Equipment used if any _____
Description of duties _____

C. Job title _____ Dates employed: From _____ to _____
Employer _____ Hours worked per week _____
City _____ State _____ Phone number (____) ____ - _____
Reason for leaving _____
Supervisor's name _____
Equipment used if any _____
Description of duties _____

By signing this application you certify that the information is true to the best of your knowledge.

Name

Date

Completed forms can be e-mailed to wenninghofffarm@hotmail.com or sent to Amy Wenninghoff – 6707 Wenninghoff Road – Omaha, NE 68122