

SHIPSHEWANA TRADING PLACE
345 S VAN BUREN STREET, PO BOX 185, SHIPSHEWANA, IN 46565

Please Print

APPLICATION FOR EMPLOYMENT

TO APPLICANT: Read this introduction carefully before answering any questions. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job-related medical condition or disability, or any other legally protected status. *This information will be treated confidentially.*

Name (Last, First, Middle)		Date:
Present Street Address:		Area Code/Phone Number:
City, State, Zip:		How Long?
Position(s) Applied for: <u>Flea Market:</u> <input type="checkbox"/> Parking <input type="checkbox"/> Vendor		Expected Rate of Pay: \$
<u>Farmstead Inn:</u> <input type="checkbox"/> Front Desk <input type="checkbox"/> Breakfast <input type="checkbox"/> Laundry <input type="checkbox"/> Housekeeping		Do you have a valid Driver's License:
<input type="checkbox"/> <u>Misc/Antique Auction</u> <input type="checkbox"/> <u>Restaurant</u> <input type="checkbox"/> <u>RV Service Center</u> <input type="checkbox"/> <u>Livestock/Horse Auction</u>		<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you work? <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Overtime		Method of Transportation to get to work:
Have you ever worked for the Shipshewana Trading Place? If so please explain why you left.		<input type="checkbox"/> Yes <input type="checkbox"/> No
Would you need any special accommodations to complete the physical requirements of a job?		<input type="checkbox"/> Yes <input type="checkbox"/> No
List accommodations :		
Have you been convicted of a crime in the past seven years, excluding misdemeanors and summary offenses? If YES, describe in full. A conviction will not necessarily bar employment. Fair consideration will be given to, date of offense, seriousness and nature of violation and rehabilitation. <input type="checkbox"/> Yes <input type="checkbox"/> No Explain: _____		
Are you prevented from lawfully becoming employed in this country because of VISA or immigration status? (Proof of citizenship or immigration status will be required upon employment.)		<input type="checkbox"/> Yes <input type="checkbox"/> No
If your application is considered favorably, what date could you report for work: _____		
List name(s) and/or relationship(s) of relatives currently working for the Company: _____		
How were you referred to the Shipshewana Trading Place?		

EMPLOYMENT HISTORY: Please begin with your most recent

Company Name		Address:		
City, State, Zip:		Telephone:		
From (Mo/Yr)	To (Mo/Yr)	Starting Pay:	Last Pay:	Type of Business:
Name of Supervisor:		Reason for Leaving:		
Describe in detail the work that you did:				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				
Company Name		Address:		
City, State, Zip:		Telephone:		
From (Mo/Yr)	To (Mo/Yr)	Starting Pay:	Last Pay:	Type of Business:
Name of Supervisor:		Reason for Leaving:		
Describe in detail the work that you did:				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				
Company Name		Address:		
City, State, Zip:		Telephone:		
From (Mo/Yr)	To (Mo/Yr)	Starting Pay:	Last Pay:	Type of Business:
Name of Supervisor:		Reason for Leaving:		
Describe in detail the work that you did:				
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later				

REFERENCES (NOT RELATIVES)

Name:	Business:
Telephone Number:	Address:
Name:	Business:
Telephone Number:	Address:
Name:	Business:
Telephone Number:	Address:

Mark those skills with which you have experience

Experience in: Hospitality Housekeeping Customer Service Restaurant RV Other (Specify)

ADMINISTRATIVE

<input type="checkbox"/> Typing/Keyboard	COMPUTER	ACCOUNTING	OTHER
<input type="checkbox"/> Phone	<input type="checkbox"/> Word	<input type="checkbox"/> Accts. Payable	<input type="checkbox"/> Food Prep
<input type="checkbox"/> Fax Machine	<input type="checkbox"/> Excel	<input type="checkbox"/> Accts. Rec.	<input type="checkbox"/> Food Server
<input type="checkbox"/> Filing	<input type="checkbox"/> Email	<input type="checkbox"/> Payroll	MANAGEMENT
<input type="checkbox"/> Ten Key/Touch			<input type="checkbox"/> Supervisory Training
<input type="checkbox"/> Data Entry			<input type="checkbox"/> Supervisory Experience
<input type="checkbox"/>			# people superv _____

INDUSTRIAL

<input type="checkbox"/> Routing	SAWS	WELDING	SPECIAL SKILLS
<input type="checkbox"/> Shipping/Receiving	<input type="checkbox"/> Table Saw	<input type="checkbox"/> Mig <input type="checkbox"/> Tig	<input type="checkbox"/> Forklift Training
<input type="checkbox"/> Forklift Operation	<input type="checkbox"/> Chop Saw	<input type="checkbox"/> Aluminum	<input type="checkbox"/> Forklift License
<input type="checkbox"/> Packing	<input type="checkbox"/> Radial Arm Saw	<input type="checkbox"/> Steel	<input type="checkbox"/> Valid CDL License
<input type="checkbox"/> Electrical	<input type="checkbox"/> Jig Saw	<input type="checkbox"/> Plasma	<input type="checkbox"/> Valid Driver's License
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Band Saw	<input type="checkbox"/> Cutting Torch	<input type="checkbox"/> CNC Equipment
<input type="checkbox"/> Inspection	<input type="checkbox"/> Other Saws	<input type="checkbox"/> Welding	<input type="checkbox"/> Htg. & A/C Certification
<input type="checkbox"/> Tape Measure	AIR TOOLS	<input type="checkbox"/> Certification	
<input type="checkbox"/> Read Engineering Prints	<input type="checkbox"/> Nail Gun		
<input type="checkbox"/> Read Production Orders	<input type="checkbox"/> Staple Gun		
<input type="checkbox"/> Group Leader	<input type="checkbox"/> Screw Gun		
	<input type="checkbox"/> Air Drill		

OTHER RELATIVE EXPERIENCE

RECORD OF EDUCATION

<u>High School Name and Address:</u>	<u>Did you Graduate?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Course of Study?</u>
<u>College Name and Address:</u>	<u>Did you Graduate?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Course of Study?</u>
<u>Other (Specify):</u>	<u>Did you Graduate?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Course of Study?</u>

Academic honors, awards, scholarships, professional organizations, volunteer activities, certificates, publications, licenses, or any other information you consider significant and relevant to employment at Shipshewana Trading Place:

MILITARY SERVICE RECORD

<u>Were you in the U.S. Armed Forces?</u> <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Present Selective Service Classification</u>	<u>Selective Service Number?</u>
<u>Branch:</u> <input type="checkbox"/> Marines <input type="checkbox"/> Navy <input type="checkbox"/> National Guard <input type="checkbox"/> Army <input type="checkbox"/> Air Force <input type="checkbox"/> Coast Guard	<u>Reserve Status:</u> <input type="checkbox"/> Ready <input type="checkbox"/> Retired <input type="checkbox"/> Stand-By <input type="checkbox"/> None	
<u>Dated Entered:</u>	<u>Dated Discharged:</u>	<u>Rank at Discharge:</u>
<u>Describe Military Duties:</u>		

In consideration of my employment, I agree to conform to the Company's rules and regulations, and that my employment and compensation can be terminated with or without notice, at any time at either my option or the Company's. I understand that neither this document nor any offer of employment from the company constitutes an employment contract unless a specific document to that affect is executed by the Company President and the employee in writing.

The facts set-forth above in my application for employment are true and complete. I understand that if employed, false statements on this application or interview(s) shall be considered sufficient cause for dismissal. You are hereby authorized to check references on employers indicated above, make any investigation of my personal history and work including financial, criminal and credit record through any investigative or credit agencies or bureaus of your choice.

X _____

DATE: _____