

Kansas Ethanol, LLC

Application for Employment

PERSONAL INFORMATION

Name _____					
Last	First	Middle			
Present address _____					
Number	Street	City	State	Zip	
Telephone () _____			Social Security No. _____ - _____ - _____		
If under 18, please list age _____					
Position applied for (1) _____			Days/hours available to work		
(2) _____			No Pref _____ Thur _____		
			Mon _____ Fri _____		
			Tue _____ Sat _____		
			Wed _____ Sun _____		
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME					
When are you available for work? _____				Have you ever been convicted of a felony? <input type="checkbox"/> YES <input type="checkbox"/> NO	

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Bus. or Trade School	_____	_____	_____	_____
Professional School	_____	_____	_____	_____

MISCELLANEOUS

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. Include training courses, certificates, licenses, professional organizations, awards, computer skills, leadership activities, or other pertinent data.

WORK EXPERIENCE

Please list your work experience from your last three (3) jobs, beginning with the most recent job held. If you were self-employed, give firm name.

Name of employer _____	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code _____		From To	Start Final
Phone number () _____	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer _____	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code _____		From To	Start Final
Phone number () _____	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer _____	Name of last supervisor	Employment dates	Pay or salary
Address City, State, Zip Code _____		From To	Start Final
Phone number () _____	Your Last Job Title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

May we contact your present employer? Yes No

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

Signature of applicant _____ **Date:** _____