

# APPLICATION FOR EMPLOYMENT



2027 CLEARFIELD RD.  
SHIPPENSBURG, PA 17257  
(717) 530-5430

NAME \_\_\_\_\_ PHONE # \_\_\_\_\_ CELL # \_\_\_\_\_  
(FIRST) (MIDDLE) (LAST)

ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_  
(STREET) (CITY) (STATE & ZIP CODE)

DATE OF BIRTH \_\_\_\_\_ SOCIAL SEC. NO. \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS FOR PAST THREE YEARS ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_  
(STREET) (CITY) (STATE & ZIP CODE)

ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_  
(STREET) (CITY) (STATE & ZIP CODE)

### CURRENT LICENSE

	STATE	LICENSE NO.	TYPE	EXPIRATION DATE
DRIVER LICENSES				

### EQUIPMENT OPERATING EXPERIENCE

TYPE OF EQUIPMENT	FROM (DATE)	TO (DATE)	WHAT MECHANICAL SKILLS DID YOU ACQUIRE?

### ACCIDENT RECORD FOR PAST 3 YEARS OR MORE (ATTACH SHEET IF MORE SPACE IS NEEDED)

DATES	NATURE OF ACCIDENT	FATALITIES	INJURIES
LAST ACCIDENT _____			
NEXT PREVIOUS _____			
NEXT PREVIOUS _____			

TRAFFIC CONVICTIONS AND FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)

LOCATION	DATE	CHARGE	PENALTY

- A. Have you ever been denied a license, permit or privilege to operate a motor vehicle? YES \_\_\_\_\_ NO \_\_\_\_\_
- B. Has any license, permit or privilege ever been suspended or revoked? YES \_\_\_\_\_ NO \_\_\_\_\_
- IF THE ANSWER TO EITHER A OR B IS YES, ATTACH STATEMENT GIVING DETAILS

**EMPLOYMENT RECORD (Attach sheet if more space is needed)**

LAST EMPLOYER: NAME \_\_\_\_\_ Phone#: \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY \_\_\_\_\_  
 REASONS FOR LEAVING \_\_\_\_\_

SECOND LAST EMPLOYER: NAME \_\_\_\_\_ Phone#: \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY \_\_\_\_\_  
 REASONS FOR LEAVING \_\_\_\_\_

THIRD LAST EMPLOYER: NAME \_\_\_\_\_ Phone#: \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 POSITION HELD \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_ SALARY \_\_\_\_\_  
 REASONS FOR LEAVING \_\_\_\_\_

Other References: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

LAST SCHOOL ATTENDED \_\_\_\_\_ CITY \_\_\_\_\_

**CIRCLE** HIGHEST GRADES COMPLETED: HIGH SCHOOL: COLLEGE:

**CIRCLE** CLASS STANDING: TOP 10% TOP 25% TOP 50% BOTTOM 50%

**PREVIOUS EMPLOYMENT**

WHAT DUTIES DID YOU MOST ENJOY \_\_\_\_\_

WHAT DUTIES DID YOU LEAST ENJOY \_\_\_\_\_

**FUTURE EMPLOYMENT**

DESCRIBE SPECIAL TRAINING YOU MAY HAVE RECEIVED THAT WOULD AID YOU IN THE POSITION YOU ARE APPLYING FOR.  
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WHAT GOALS DO YOU WANT TO MEET BY BEING EMPLOYED BY OUR COMPANY?

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WHAT ARE YOUR PLANS FOR THE FUTURE?

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ARE THERE ANY OTHER EXPERIENCES, SKILLS OR QUALIFICATIONS WHICH YOU FEEL WOULD ESPECIALLY FIT YOU FOR WORK WITH OUR COMPANY?

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**TO BE READ AND SIGNED BY APPLICANT**

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

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Date

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Applicant's Signature

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I authorize Martin Custom Farming LLC to run an MVR (Motor Vehicle Report) on my driving record.

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Date

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Applicant's Signature