



Application for Employment

(Pre-Employment Questionnaire)

APPLICANT INFORMATION

Last Name	First	MI	Date
Street Address			Apartment/Unit #
City	State	Zip	
Phone/Cell	E-mail Address		
Date Available			
Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?
Have you ever worked for this company?	YES	NO	If so, when?

EDUCATION

High School	Address				
From	To	Did you graduate?	YES	NO	Degree
College	Address				
From	To	Did you graduate?	YES	NO	Degree
Other	Address				
From	To	Did you graduate?	YES	NO	Degree

REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Most Recent Employer

Company	Phone ()	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference?	YES	NO

Second Most Recent Employer

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO			

Third Most Recent Employer

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES NO			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain:		

CRIMINAL HISTORY

Have you ever pleaded guilty to, or been convicted by a judge or jury, to a felony in this State or in any other state or do you have any pending felony charge(s)? You must report any felony, even if probation, parole, an Alford Plea or pretrial diversion occurred.

_____YES _____NO

If you answered "Yes" to the above question, please provide the details of each conviction or pending felony charge below, including DATE (month/year), LOCATION (city, county, state) and NATURE of ALL felony convictions or pending felony charges. Failure to list ALL felony convictions or pending felony charges may be considered a falsification of this application and result in: the withdrawal of an offer of employment, restriction on applying for any other positions at Kentucky Development Council Inc. (KDDC), and/or termination from any current employment with KDDC It is not acceptable to substitute "will discuss in interview" for this information.

Please complete the following questions below or attach on a separate page.

Do you have conflicts of interest that would interfere with your ability to do this job?

What skills or experience do you bring that makes you the best candidate for this position?

DISCLAIMER AND SIGNATURE

Employment Application Statement:

I certify that the statements made on this application are true and complete and I further agree that such statements may be investigated to verify accuracy. I further understand that any misleading or incorrect information, misrepresentation, or omission of facts may render this application void or may be cause for immediate dismissal whenever discovered. I understand that any offer of employment may be conditional on the results of a physical examination and/or functional job capacity test and/or drug and/or alcohol screening test by a physician and/or laboratory designated by KDDC.

Furthermore, any job offer also will be contingent upon satisfactory references. In accordance with applicable state and federal laws, KDDC reserves the right to engage outside services to conduct background checks on applicants for employment. This statement has been included in my application for employment to inform me in this regard. I will be required to provide for the pre-employment background check my accurate social security number, current address and date of birth. Failure to provide this information will result in the withdrawal of any employment offer. I understand that refusal or failure to appear for a scheduled pre-employment drug screen, refusal to disclose test results, or a positive drug screen indicating the presence of illegal drug(s) or inappropriate use of legal drugs, will result in the withdrawal of any job offer. Further, a positive drug screen or failure to submit for drug screening shall result in my being ineligible for hire for any position at KDDC for a minimum of one (1) year. I acknowledge that I have been advised that I have a right to request in writing information concerning the nature and scope of any such investigation. I agree to cooperate in such an investigation and I

I understand that prior to employment, I must provide information related to identity and employability. Failure to provide appropriate documentation for verification of employment eligibility shall result in immediate termination of employment in withdrawal of offer of employment.

If employed, I agree to conform to the rules and regulations of KDDC and understand that my employment and compensation can be terminated with or without cause at any time at the option of KDDC or myself. I understand that no representative of KDDC other than the authorized officers have any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing. Any such agreement made by an authorized officer must be in writing.

I acknowledge that I have read and understood all of the provisions of this application. YES NO

The Kentucky Dairy Development Council is an equal opportunity employer.

Signature

Date

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