



**Beyond the Barn**  
**Application For Employment**

We are an Equal Opportunity Employer and are committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

**Personal Information**

Name \_\_\_\_\_

Address _____		City _____	State _____	Zip _____
Phone Number _____	Mobile Number _____	Email Address _____		
Are You A U.S. Citizen or can you provide proof of a right to work in the USA? Yes <input type="checkbox"/> No <input type="checkbox"/>		Have You Ever Been Convicted Of A Felony? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If Selected For Employment Are You Willing To Submit to a Pre-Employment Drug Screening Test? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Are you 18 or older? Yes <input type="checkbox"/> No <input type="checkbox"/>				

**Position**

Position You Are Applying For _____	Available Start Date _____	Desired Pay _____
Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal/Temporary		

Availability:  Weekday Mornings    Weekday Evenings    Saturday    Sunday    Variable

**Education**

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business or Trade School				
Professional or Graduate School				
Please describe other training, seminars, coursework, etc. that applies to the job.				

## References

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

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Company name	Address	
Telephone	E-mail	Years acquainted

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

## Employment History

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	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.			

## Employment History Continued

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	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.			

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List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Are you currently employed?  Yes  No  
 May we contact your present employer?  Yes  No  
 Did you complete this application yourself  Yes  No  
 If not, who did? \_\_\_\_\_

Have you ever been in the armed forces?  Yes  No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

Are you now a member of the National Guard?  Yes  No

Do you have any friends or relatives employed by this company?  Yes  No

If yes, please provide their names and relationship to you. \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work?  Yes  No

Are you able to perform the essential physical functions and duties of this job including being able to stand for long periods, lifting at least 25lbs, and being able to use a computer?  Yes  No

If not, please describe the functions or duties you are unable to perform. \_\_\_\_\_

Please list any limited availability or upcoming non-available times ie planned vacation; school, other work obligations. \_\_\_\_\_

### ADDITIONAL INFORMATION

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.


### Signature Disclaimer

I certify that my answers are true and complete to the best of my knowledge.  
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name (Please Print)	Signature
Date	

Thank you for completing this application form and for your interest in our business.