



APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION			<i>PLEASE PRINT</i>	
Last Name	First	M.I.	Date	
Street Address			Date Available to Work	
City	State	ZIP		
Phone	E-mail Address			
Position Applying For	Social Security Number			

EDUCATION				
High School			Address	
Degree	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Years Attended
College			Address	
Degree	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Years Attended
Other			Address	
Degree	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Years Attended

EMPLOYMENT EXPERIENCE				
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 <input type="checkbox"/> NO <input type="checkbox"/>				
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 <input type="checkbox"/> NO <input type="checkbox"/>				
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 <input type="checkbox"/> NO <input type="checkbox"/>				

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

Describe any specialized training, skills, extracurricular activities, and business or civic activities
 (You may exclude activities that indicate race, color, religion, gender, national origin, disability, or any other protected class)

NOTE TO APPLICANTS: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? YES NO

I certify that these answers are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment. I understand and agree that my references, previous employers, and educational institutions may be asked for information concerning my employment, character, ability, or experience, and I release from liability any person giving or receiving such information. By completing and submitting this application, I understand and agree that any misstatement of material facts will be adequate cause for immediate withdrawal of this application or, in the event of employment, deemed a cause for dismissal.

I understand that my employment is terminable at will, having no specific duration, that this is not an employment contract, and that I may be terminated by the company at any time without liability for wages or salary except that earned at the date of termination.

This application for employment will be considered active for a period of time not to exceed 45 days.

Signature	Date
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Please return application to:

**Attn: Human Resource Department
 Lone Creek Cattle Company
 P.O. Box 82545
 Lincoln, NE 68501-2545**