



Boreas Freeze Dry LLC Employment Application

Please complete the entire application.

Employer: Boreas Freeze Dry LLC
Address: 601 N Hayward Dr
City/State/ZIP: Mount Vernon, Missouri 65712
Telephone: 417-889-5313

It is the policy of Boreas Freeze Dry LLC to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability, or veteran status.

1. Applicant Information

Applicant Full Name: _____
Home Address: _____
City/State/ZIP: _____
Number of years at this address: _____
Date of Birth: _____ Home Phone: _____
Mobile Phone: _____
Email Address: _____

2. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: _____
Relationship to you: _____
Address: _____
City/State/ZIP: _____
Daytime Phone: _____ Evening Phone: _____

3. Job Position Applied For: _____
Full or Part Time? _____

4. Who referred you to our company? _____
Do you have any friends or relatives who work here? If yes, please list here:

5. Are you at least 18 years old? _____ Yes _____ No



6. Are you willing to work any shift, including nights and weekends? ____Yes ____No

If no, please state any limitations:

7. If applicable, are you available to work overtime? ____Yes ____No

8. If you are offered employment, when would you be available to begin work?

9. If hired, are you able to submit proof that you are legally eligible for employment in the United States? ____Yes ____No

10. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of experience and circle the number that corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Skill	Years of Experience	Ability or Rating
		1 2 3 4 5
_____	_____	1 2 3 4 5
_____	_____	1 2 3 4 5

11. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) that you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue the back page of this application.

Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____



Employer Name: _____

Supervisor Name: _____

Address: _____

City/State/ZIP: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

12. Applicant's Education and Training

College/University Name and Address

Did you receive a degree? _____ Yes _____ No If yes, degree(s) received: _____

High School/GED Name and Address

Did you receive a degree? _____ Yes _____ No

Other Training (graduate, technical, vocational):

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements:

Military Service:

_____ Yes _____ No

Branch: _____

Specialized Training: _____



13. References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

14. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:



Certification

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for the rejection of my application or, if employment commences, immediate termination.

I authorize Boreas Freeze Dry LLC to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Management, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Boreas Freeze Dry LLC, except in a specific written contract of employment signed on behalf of the organization by its Management, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION, AND I UNDERSTAND AND AGREE TO ITS TERMS.

Applicant Signature

Date