

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job related factors.

Answer each question fully and accurately. Failure to complete this application in its entirety may result in the rejection of your application. Use blank paper if you do not have enough room on this application. **PLEASE PRINT using a black or blue pen**, except for your signature. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Position Applying For: \_\_\_\_\_ Job Reference # \_\_\_\_\_

Are you seeking: Full-time  Part-time  employment? Date: \_\_\_\_\_

When could you start work? \_\_\_\_\_

How (or from whom) did you hear about this position? \_\_\_\_\_

\_\_\_\_\_  
Last Name, First Name MI Telephone # (Include area code)

\_\_\_\_\_  
Street Address City, State, Zip Code (9-digit, if known)

Social Security # (optional ♦): \_\_\_\_\_ E-mail Address \_\_\_\_\_

(♦Will be required during the final stage of interview process in order to conduct credit, background, reference, etc. checks.)

Are you 18 years of age or older?..... Yes  No

(If you are hired, you will be required to submit proof of age)

If hired, can you furnish proof you are eligible to work in the U.S?..... Yes  No

Have you ever applied at Noah's Ark Processors, LLC t/a WR Reserve before?.... No  Yes  If yes, when? \_\_\_\_\_

Have you ever been employed by Noah's Ark Processors, LLC t/a WR Reserve?..No  Yes  If yes, when? \_\_\_\_\_

Do you have any relatives who work for Noah's Ark Processors, LLC t/a WR Reserve?

No  Yes

If yes, who/when/where? \_\_\_\_\_

Have you ever been convicted of any law violation?

Include any plea of "guilty" or "no contest"? (Exclude minor traffic violations).....No  Yes

If yes, give details \_\_\_\_\_

(A "yes" answer does not automatically disqualify you from employment.

The nature of the offense, date of occurrence, and relevancy to the position applied for, will be considered.)

Are you now or do you expect to be engaged in any other business or employment?..... No  Yes

If yes, please explain \_\_\_\_\_

## EDUCATION

	Name and Location of School	No. of Years Completed	Course of Study Degree (s) Earned
High School			
College/University			
Vocational Trade/ Graduate School			

## SPECIAL SKILLS

What skills or additional training do you have that are related to the position for which you are applying? *(Please include job-related software programs you are familiar with.)*

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What machines or equipment can you operate that are related to the position for which you are applying? \_\_\_\_\_

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Periodically, it may be necessary for you to drive during the performance of a job. Do you have a valid/current driver's license?

No       Yes

Driver's License Number \_\_\_\_\_ State Issued by: \_\_\_\_\_

Class of License:      Commercial       Other  \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last 3 years?.....No       Yes

If yes, give details \_\_\_\_\_

List professional, trade, business or civic activities and offices held.

*(Exclude labor organizations and memberships, which reveal race, color, religion, national origin, sex, age disability or their protected status.)*

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## WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references.

(Resumes may be included, *but not substituted*, as they do not provide all necessary information.)

**NOTE: A job offer may be contingent upon acceptable references from current and former employers.**

Company Name	Employed					Pay
Address	From (mm/yy)	To (mm/yy)	Start	Final (present)		
City, State & Zip Code			Telephone			
Job Title	Supervisor					
Duties			Reason for Leaving			
Company Name	Employed					Pay
Address	From (mm/yy)	To (mm/yy)	Start	Final (present)		
City, State & Zip Code			Telephone			
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City, State & Zip Code			Telephone			
Job Title	Supervisor					
Duties			Reason for Leaving			

## REFERENCES

Have you worked or attended school under any other names?.....Yes  No

If yes, give names: \_\_\_\_\_

Are you presently employed?.....Yes  No

If yes, whom do you suggest we contact? \_\_\_\_\_

Have you ever been fired from a position or asked to resign?.....Yes  No

If yes, please explain: \_\_\_\_\_

Please provide three references (*Name, Address and Telephone*). Do not include relatives or former employers.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## AFFIDAVIT, CONSENT AND RELEASE

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I understand that the employer may request an investigative consumer report from a consumer-reporting agency. This report may include information as to my credit, personal history, law violations and driving record. I understand I have the right to make written request within reasonable time for the disclosure of the name and address of the consumer-reporting agency so that I may obtain a complete disclosure of the nature and scope of investigation.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer (except as previously noted), past employers, and organizations to provided relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre and/or post employment drug screen as a condition of employment, if required.

I understand that if I an extended an offer of employment it may be conditioned on my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT , OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME.

I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF NOAH'S ARK PROCESSORS, LLC T/A WR RESERVE AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I UNDERSTAND THAT FILLING OUT THIS FORM DOES NOT INDICATE THERE IS A POSITION OPEN AND DOES NOT OBLIGATE NOAH'S ARK PROCESSORS, LLC T/A WR RESERVE TO HIRE. IF HIRED, I AGREE TO ABIDE BY ALL WORK RULES, POLICIES AND PROCEDURES. THE COMPANY RETAINS THE RIGHT TO REVISE ITS POLICIES OR PROCEDURES, IN WHOLE OR IN PART, AT ANY TIME.

I have read, understand, and by my signature accept these statements.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

*This application for employment will remain active for sixty days.*

**EMPLOYEE SELF IDENTIFICATION FORM**  
EEO/Affirmative Action Information

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to race, color, religion, national origin, sex, age, veteran status or disability.

**COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.**

**PLEASE PRINT**

**DATE:** \_\_\_\_\_

**Position Applied for:** *(list only one)* \_\_\_\_\_

**What is your sex?**  Female  Male

**What is your race/ethnic origin?** *(Multiple selections permitted)*

- White/Caucasian - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- American Indian or Alaska Native - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Black or African American - A person having origins in any of the black racial groups of Africa.
- Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian sub continent including, i.e. Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Island, Thailand and Vietnam.
- Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central America, or other Spanish culture or origin, regardless of race.
- No response

**Check all that apply:**

Vietnam Era Veteran  Other Protected Veteran  Special Disabled Veteran

Recently Separated Veteran [less than 3 yrs - not before 11/2000] \_\_\_\_\_

Separation Date