



SRS COMMODITIES, LTD.

411 Second Avenue Northeast PO Box 386 Mayville, North Dakota 58257
701.786.3402 | Fax 701.786.3374 | www.srscommodities.com

APPLICATION FOR EMPLOYMENT

SRS is an equal opportunity employer. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status or sexual orientation.

Position applying for _____ Date _____

GENERAL INFORMATION				
Name (Last)	(First)	(Middle Initial)		Home Telephone () -
Address (Mailing Address)	(City)	(State)	(Zip)	Other Telephone () -
E-Mail Address		Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If necessary, best time to call you at home a.m. p.m.		If currently working may we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes , best time to call:		
Date you can start work		Days Available: <input type="checkbox"/> Sun <input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thu <input type="checkbox"/> Fri <input type="checkbox"/> Sat		
Will Accept: <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Regular <input type="checkbox"/> Day <input type="checkbox"/> Swing/Evening <input type="checkbox"/> Split				
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No				
DRIVER LICENSE INFORMATION				
Do you have a valid driver license? <input type="checkbox"/> Yes <input type="checkbox"/> No Driver License Class:___ Issuing State: __				
EDUCATION, TRAINING, CERTIFICATIONS AND VETERAN STATUS				
Do you have a High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Other education after High School (most recent first):				
Name of School, City, State	# of Quarter or Semester Credits Earned	Graduated	Earned Degree (AA, AS, AAS, BA, BS, Masters, PhD)	Major or Course of Study
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
		<input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been employed here before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, dates: What did you do?				
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, how old:				



SRS COMMODITIES, LTD.

411 Second Avenue Northeast PO Box 386 Mayville, North Dakota 58257
701.786.3402 | Fax 701.786.3374 | www.srscommodities.com

ADDITIONAL INFORMATION AND SKILLS

Describe volunteer work, community involvement, hobbies, trade or technical skills, or other qualifications or skills:

WORK EXPERIENCE (current or most recent first)

Employer	Telephone Number	From (Month/Year)
Street Address/City/State		
Job Title		To: (Month/Year)
Duties/Skills/Equipment and Software Used:		Hours per Week
		Last Salary
		Last Supervisor
Reason for Leaving	May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Telephone Number	From (Month/Year)
Street Address/City/State		
Job Title		To: (Month/Year)
Duties/Skills/Equipment and Software Used:		Hours per Week
		Last Salary
		Last Supervisor
Reason for Leaving	May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer	Telephone Number	From (Month/Year)
Street Address/City/State		
Job Title		To: (Month/Year)
Duties/Skills/Equipment and Software Used:		Hours per Week
		Last Salary
		Last Supervisor
Reason for Leaving	May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	



SRS COMMODITIES, LTD.

411 Second Avenue Northeast PO Box 386 Mayville, North Dakota 58257
701.786.3402 | Fax 701.786.3374 | www.srscommodities.com

BUSINESS-RELATED REFERENCES		
-----------------------------	--	--

Name	Address, City, State, Zip	Phone Number

I certify the information contained in this application is true, correct and complete. I understand that if I become employed, false statements reported on this application may be considered sufficient cause for dismissal.

Applicant's Signature: