RAY-CARROLL COUNTY GRAIN GROWERS, INC. RAY-CARROLL FUELS, LLC	APPLICATION FOR EMPLOYMENT Resumes are not accepted in lieu of a completed application	
Name (Last, First, Middle)	Social Security Number	
E-Mail Address	Home Telephone Number (Include Area Code)	
Mailing Address	Cell Phone Number	
City	State Zip Code	
Position Applied For	Data Available for Work	
- CD 111 C 1111 A A 1111	Date Available for Work	
Type of Position for Which You Are Available (circle one)	Full-Time Part-Time Seasonal  Drivers License Number State	
What is your desired Salary Range?	Drivers License Number State	
Have you ever been convicted of a law violation since age 16? Yes (Explain) No		
Have you ever been terminated from employment or asked to resign by an employer? Yes (Explain) No		
Have you any objection for us making inquiries of your present employer? Yes No		
You will be required to direct deposit your paycheck. Will you accept this condition? Yes No		
Do you have any relatives employed with Ray-Carroll? Yes No	If Yes, explain.	
SKILLS What office equipment can you operate?		
List software at which you are proficient?		
EDICATION		
EDUCATION  Are you a High School Graduate or do you have an equivalency (GED) certificate?  Yes  No		
College Attended (Name and Address) COPY OF TRANSCRIPT MUST BE ATTACHED.		
CERTIFICATES // ICENSES #-		
CERTIFICATES/LICENSES #: APPLICANT STATEMENT		
I understand that any information I have provided in order to apply for and secure work with the employer is true, complete, and correct.  I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect will be sufficient caused to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.  I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering and, using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.  I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any		
applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.  I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for		
employment, it will be necessary to reapply and fill out a new application.		
If I am hired, I understand that I am free to resign at any time, with or without cause and without proper notice, and the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.  I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require		
me to complete an I-9 Form in this regard.		
DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.		
I certify that I have read, fully understand, and accept all terms of the foregoing Applican	t Statement.	
Signature of Applicant	Date	
REFERENCES		
Name	Telephone #	

EMPLOYMENT RECORD		
Describe in detail all positions that you have had during the last ten (10) years, starting with the most recent employed	ment. If more than one position or classifications has been held with a	
given organization, list each position or classification as a separate period of employment. Attach extra sheets if necessary.		
Dates Employed (Month and Year) From: To:	Describe Duties of Job	
Employer		
Supervisor (Name and Title)		
Employer Address		
City, State, and Zip		
Job Title Monthly Salary		
Reason for Leaving		
Dates Employed (Month and Year) From:		
To: Employer	Describe Duties of Job	
Supervisor (Name and Title)		
Employer Address		
City, State, and Zip		
Job Title Monthly Salary		
Reason for Leaving		
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