

APPLICATION FOR EMPLOYMENT

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(989) 681-5771



PORTLAND 6018 E. Grand River Ave. Portland, MI 48875 Phone: (517) 647-4164	MISSION STATEMENT: "To provide superior service, parts availability, and sales expertise that cultivates customer relationships and makes us outstanding in our field."			ST. LOUIS 1365 E. Monroe Rd. St. Louis, MI 48880 Phone: (989) 681-5771
GRAND LEDGE 332 W. Saginaw Hwy. 48837 Grand Ledge, MI 48837 Phone: (517) 622-2220	LINWOOD 500 N. Garfield Rd. Linwood, MI 48634 Phone: (989) 697-4486	ROSEBUSH 4240 E. Rosebush Rd. Rosebush, MI 48878 Phone: (989) 779-1707	TECUMSEH 106 N. Occidental Hwy. Tecumseh, MI 49286 Phone: (517) 423-2133	SOUTH LYON 28342 Pontiac Trail South Lyon, MI 48178-9240 Phone: (248) 437-2091

Name: _____ Date of Application: ____ / ____ / ____

Position (s) applying for: _____ Location your applying to: _____

Type of employment desired: Full Time Part-time Educational Co-op Seasonal Temporary

APPLICANT'S STATEMENT

I certify that all information I provide in order to apply for and secure work with this employer is true and accurate, and without consequential omissions of any kind whatsoever. I understand that this application will be given every consideration, but it is not a promise of employment.

I expressly authorize, without reservation, this employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), neighbors, friends, business associates, 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. This inquiry includes information as to my character, education, work experience, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further authorize the Company to contact my previous employers and I authorize those employers to disclose to the Company all records pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representative, and all other persons, corporations or organizations who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination, and a test for the presence of alcohol or drugs in my system, performed by a doctor selected by the Company. Further, I understand that at any time after I am hired, the Company may require me to submit to a physical examination, and drug and alcohol testing, to the extent permitted by law. I consent to the disclosure of the results of the physical examinations and related tests to the Company. I also understand that I may be required to take other tests, such as personality and honesty tests, prior to employment and during my employment.

If I am hired, I understand my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at any time with or without cause and with or without prior notice, and the Company reserves the same right to terminate my employment with or without cause or prior notice, except as may be required by law. No one other than the President and Board of Directors of the Company has authority to modify this relationship or to make any agreement to the contrary. Any such modification or agreement must be in writing.

I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided on this application will be verified, and I further understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect will be sufficient cause to (i) eliminate me from further consideration for employment (ii) may result in my immediate discharge from employment with this Company, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ENTIRE ABOVE STATEMENT

Signature of Applicant: _____ Date of Application: ____ / ____ / ____

This application remains current for 120 days. At the conclusion of that time, if you have not heard from the employer and still wish to be considered for employment, it will be necessary for you to reapply and fill out a new application.

Personal Data

INSTRUCTIONS: PLEASE PRINT, except for the signatures required on application. Answer each question fully and accurately. No action can be taken on this application unless all questions have been answered. Use a blank sheet of paper if you do not have enough room on this application. All information you leave on this application will be held in strict confidence.

Name: _____ Social Security # _____

Present Address (including City): _____ Contact Phone # _____

Other Contact Phone # _____ Email Address: _____

How did you hear about us? _____

How long have you lived at your present address?

Years: _____ Months: _____

What is the best time to call you on your cell phone or at home?

Time: _____ AM or PM

May we call you at work? _____ Yes No

Time: _____ AM or PM Phone Number? _____

Have you ever been employed at and Bader & Sons Co. location before?

..... Yes No

If Yes, please give dates: From ___/___/___ To ___/___/___

Do you have any friends or relatives working here? Yes No

If Yes, please give name(s) and relationship to you: _____

Do you have a farming background? Yes No

Have you ever worked with farming or light industrial equipment?

..... Yes No

Have you worked for other dealers? Yes No

If Yes, who and what line of equipment: _____

Do you have a Driver's License? Yes No

State: _____ License #: _____ Exp. Date ___/___/___

Endorsements Or Classifications? _____

Will you travel if the job requires it? Yes No

Have you been convicted of any moving violations in the past 5 years?

..... Yes No

If Yes, please explain: _____

Are you legally eligible to work in this country? Yes No
(proof of eligibility will be required upon offer of employment)

If you are under 18 can you furnish a work permit?

..... Yes No

If No, please explain: _____

The following question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodations, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Are you able to perform the essential functions of the job for which you are applying (with or without accommodations)?

..... Yes No

Date you are available to start working? _____/_____/_____

What is your desired salary range or hourly rate of pay?

Salary: _____ Hourly Rate: _____

Will you work overtime if required ? Yes No

If No, please explain: _____

Are you able to meet the attendance requirements?

..... Yes No I need the attendance requirement explained

Answering "Yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness, and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty", "no contest", or been convicted of a crime?

..... Yes No

If Yes, please provide date(s) and details: _____

Have you ever been bonded ? Yes No

Educational Background

Starting with your most recent school attended, please provide the following information. (Education information will be verified)

School (City & State)	Years Completed	Degree Achieved	GPA, Class Rank	Major/Minor

Additional Information

Please indicate and actual experience and/or skills you have in the following positions:

Office

- Office Manager
- Bookkeeper
- Accounts Receivable
- Accounts Payable
- Payroll Clerk
- Tag / Title Clerk
- Warranty Clerk
- Data Entry
- 10 Key Operator
- Cashier
- Advertising/Promotions
- Secretary

Parts

- Parts Manager
- Parts Counter
- Parts Inventory Control
- Parts Stocker
- Parts Driver/Delivery

Sales/Leasing

- Sales Manager
- Farm Equipment Sales Person (New)
- Farm Equipment Sales Person (Used)
- Light Industrial Equipment Sales
- F & I Manager
- Leasing Manager
- Truck Manager

Skills

- Computer
- Telephone Answering
- Customer Service
- Record Keeping
- Typing
- Filing
- Fax Machine
- Spreadsheets

Service and Setup

- Service Manager
- Service Writer/Advisor
- Shop Foreman
- Tractor Mechanic
- Implement Mechanic
- Hydraulics Mechanic
- Small Engine Mechanic
- Machine Setup
- Diesel Mechanic
- Refrigeration
- Truck Driver
- Painter/Detail Service
- Body Repair
- Welding

Other

- Janitor
- Carpenter
- Building Maintenance

Do you have any special licensing or certifications? Yes No

If yes, please summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Employment History

Instructions: Starting with your most recent employer, provide the following information. List employers in consecutive order, accounting for all periods of time including military service, temporary employment, periods of unemployment, and self employment. Do not exclude any employers. If self-employed, give company name and supply business references. If you need additional space, please ask for additional employment history page.

Previous salary will not be used to determine compensations with this employer.

Employer: _____ Address: _____ City: _____ State: _____ Phone # _____

Dates Employed: From ___/___/___ To ___/___/___ Title of your last position held: _____ Immediate Supervisor: _____

Starting Compensation - Salary: _____ Hourly: _____ **Ending Compensation** - Salary: _____ Hourly: _____ Commission/Bonus/Other: _____

May we contact for a reference? **Yes** **No** **Later** Why did you leave? _____

Summarize the type of work performed and job responsibilities: _____

What did you like most about your job? _____

What were the things you liked least about your job? _____

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May we contact for a reference? **Yes** **No** **Later** Why did you leave? _____

Summarize the type of work performed and job responsibilities: _____

What did you like most about your job? _____

What were the things you liked least about your job? _____

