

**DAKIN DAIRY FARMS
 JERRY DAKIN DAIRY
 DAKIN NATURAL SOILS
 DAKIN DAIRY FARMS FARM MARKET**

Application for Employment

30771 Betts Rd. Myakka City, FL 34251
 941-322-2802 (Fax) 941-322-8189
www.DakinDairyFarms.com
info@dakindairyfarms.com

1. Dakin Dairy Farms, Jerry Dakin Dairy, Dakin Natural Soils & Dakin Dairy Farms Farm Market is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, nationality, veteran status, or any other status protected under local, state or federal law.
2. We are a DRUG FREE work place.
3. Background checks WILL be performed.
4. Previous Employers will be called and References will be checked.

DDF JDD DNS DDF-FM

Name:				
	Last	First	Middle	
Address:				
	Street	City	State	Zip Code
Email:				
Phone:		Cell Phone:		

Are you legally eligible for employment in the USA? Yes No
 Are you a member or do you support an animal rights organization? Yes No

Convicted of a felony: <input type="checkbox"/> Yes or <input type="checkbox"/> No
If yes explain:

<u>Education</u>	
High School:	Year Graduated:
College:	Year Graduated:
Degree:	

Position applying for: _____
 Days Available to Work: M T W TH F Sat Sun (Circle All Days That Apply)
 Hours Available to Work: _____

LIST ANY SKILLS YOU HAVE: (Please list all computer skills, equipment skills, carpentry, electrical, etc.)

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Employment History

Previous employer:	
Dates employed:	
Address:	
Phone#:	Supervisor:
Position:	
Explain your duties:	
Reason for leaving:	

Previous employer:	
Dates employed:	
Address:	
Phone#:	Supervisor:
Position:	
Explain your duties:	
Reason for leaving:	

Personal References

Name	Phone #	How long known?	Relationship to you

PLEASE ATTACH RESUME IF YOU HAVE ONE - FUTURE GOALS/PLANS:

I, _____ authorize DDF, JDD, DNS and DDF Farm Market to contact my previous employer

 Signature Date

OFFICE USE ONLY	
FIRST INTERVIEW: Scheduled with:	Date & Time:
SECOND INTERVIEW: Scheduled with:	Date & Time:

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Employee Authorization to Release Records

I understand and agree that: The information supplied, was by myself and all information is true and correct, to the best of my knowledge. I understand that false or misleading information given in my application and/or interview(s) will be considered as cause for possible dismissal and/or discharge. I also understand that I am to abide by all rules and regulations of the company. The company has my authorization to thoroughly investigate my work and personal history. I understand that the information supplied by me. Regarding my: employment history, education (including to release transcripts), credit history, criminal history, medical and professional licensing, motor vehicle record(s), residence history and references, will be will be utilized as part of the processing procedures. A background check will be conducted to verify the veracity of the information submitted and will be utilized to develop information concerning my character, general reputation, personal characteristics and mode of living.

I hereby authorize Sentry Link LLC an agent of Dakin Dairy Farms, Jerry Dakin Dairy, Dakin Natural Soils and Dakin Dairy Farms Farm Market to make a thorough check of my past employment , education and activities

MUST PRESENT ORIGINAL SOCIAL SECURITY CARD AND VALID ID

Entiendo y acepto que: La información suministrada, es por mí y toda la información es verdadera y correcta, a mi mejor de mi conocimiento. Yo entiendo que la información falsa o engañosa dada en mi solicitud y / o entrevista (s) será considerada como causa para su posible despido. También entiendo que debo cumplir con todas las reglas y regulaciones de la compañía. La empresa cuenta con mi autorización para investigar a fondo mi trabajo e historia personal. Entiendo que la información suministrada por mí en cuanto a mi: historial de empleo, educación (incluyendo a liberar transcripciones), historial de crédito, historial criminal, licencia médica y profesional, ficha (s) de vehículos de motor, la historia de residencia y referencias, se utilizarán como parte de los procedimientos de procesamiento. Una verificación de antecedentes se llevará a cabo para verificar la veracidad de la información presentada y será utilizado para desarrollar la información referente a mi carácter, reputación general, características personales y modo de vida.

Por la presente autorizo Sentry Link, LLC agente de Dakin Dairy Farms, Jerry Dakin Dairy, Dakin Natural Soils y Dakin Dairy Farms Farm Market hacer un control minucioso de mi empleo anterior, educación y actividades.

DEBE PRESENTAR SEGURO SOCIAL ORIGINAL Y UN ID VALIDO

First Name/ nombre

Last Name/ apellido

DOB/ fecha de nacimiento

Social Security/ seguro social

Email/ correo electronico

Signature/ Firma

**Dakin Dairy Farms, Inc.
Jerry Dakin Dairy
Dakin Natural Soil, Inc.
Dakin Dairy Farms Farm Market, Inc.**

DRUG TESTING

_____ administered a drug test on _____ in compliance with the Dakin Dairy Farms, Jerry Dakin Dairy, Dakin Natural Soils, & Dakin Dairy Farms Farm Market employee drug testing policy.

_____ administro un examen de droga a _____ como acordado por la poliza de Dakin Dairy Farms, Jerry Dakin Dairy, Dakin natural Soils & Dakin Dairy Farm Market para los empleados

Employee Name- Nombre del Empleado

Employee Signature- Firma del Empleado

Date- Fecha

**Test Result:
Resultado del Examen:**

_____ Negative/ Negativo

_____ Positive With: Positivo Con:

Prescriptions/ Prescriptivos

