

**SEAQUIST ORCHARDS-CANNING CO.  
JOB APPLICATION**

PERSONAL INFORMATION:

First & Last Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Male  Female

Are you eligible to work in the United States? Yes  No

Have you ever been convicted of a crime or have any pending arrests? Yes  No

If Yes, please explain:

\_\_\_\_\_

AVAILABILITY:

What days and times are you available?

\_\_\_\_\_

How many hours per week can you work? \_\_\_\_\_ If hired, on what date can you start working? \_\_\_\_\_

EDUCATION/QUALIFICATIONS:

Name of school:

Degree/Diploma:

Graduation Year:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have experience working in a commercial kitchen? Yes  No

If Yes, please explain:

\_\_\_\_\_

Are you able to easily lift 50 lb Yes  No

Do you have experience driving a forklift? Yes  No

Do you have experience driving large trucks, tractors or farm equipment? Yes  No

If Yes, please explain what and for how long:

\_\_\_\_\_

\_\_\_\_\_

Do you have a CDL License? Yes\_\_\_\_ No \_\_\_\_

Please list any other skills, qualification, licenses, training or awards:

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**EMPLOYMENT HISTORY:**

# 1 Present or previous position: \_\_\_\_\_ Employer: \_\_\_\_\_

Month/Year worked: \_\_\_\_\_ to \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer? \_\_\_\_\_ If Yes, phone number \_\_\_\_\_

# 2 Previous position: \_\_\_\_\_ Employer: \_\_\_\_\_

Month/Year worked: \_\_\_\_\_ to \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer? \_\_\_\_\_ If Yes, phone number \_\_\_\_\_

# 3 Previous position: \_\_\_\_\_ Employer: \_\_\_\_\_

Month/Year worked: \_\_\_\_\_ to \_\_\_\_\_ Salary/Wage: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer? \_\_\_\_\_ If Yes, phone number \_\_\_\_\_

References: Name/Title/Phone (Please list up to 3 references):

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I certify that information contained in this application is true and complete. I authorize the verification of any or all information listed above and that my references can be contacted for verification.

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

Seaquist Canning Co. LLC is an equal opportunity employer.

To submit application:

Drop off: Seaquist Orchards Farm Market, 11482 Hwy 42, Sister Bay, WI 54234

Mail to: Seaquist Canning Co., 2023 Highview Rd, Ellison Bay, WI 54210

Email to: [lisa@seaquistorchards.com](mailto:lisa@seaquistorchards.com) Fax to: 920-854-7307