



150 10th St NW, Suite 2, Milaca, MN 56353
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www.lighthousecfs.com

EMPLOYMENT APPLICATION

Applicant Information

Full Name: _____
First M.I. Last

Phone: _____ Email: _____

Address: _____
Street Address Apt/Unit # City, State Zip

DOB: _____
MM/DD/YYYY

Position(s) Applied For: _____

Date Available: _____ Desired Annual Salary: _____

Are you a citizen of the United States? _____ YES _____ NO
If no, are you authorized to work in the U.S.? _____ YES _____ NO

Have you ever worked for LCFS in the past? _____ YES _____ NO
If yes, when? _____

Have you ever been convicted of a felony? _____ YES _____ NO
If yes, please explain: _____

Education

High School: _____ Timeframe attended: _____ - _____
Address: _____ Did you graduate? _____ YES _____ NO
Program: General Education _____

College: _____ Timeframe attended: _____ - _____
Address: _____ Did you graduate? _____ YES _____ NO
Degree/Program: _____

College: _____ Timeframe attended: _____ - _____
Address: _____ Did you graduate? _____ YES _____ NO
Degree/Program: _____

Employment History

Company: _____ Title: _____
City/State: _____ From: _____ To: _____
Phone: _____ Reason for Leaving: _____
Supervisor: _____
Responsibilities: _____
May We Contact Your Previous Supervisor for a reference? _____ YES _____ NO
If no, please explain: _____

Company: _____ Title: _____
City/State: _____ From: _____ To: _____
Phone: _____ Reason for Leaving: _____
Supervisor: _____
Responsibilities: _____
May We Contact Your Previous Supervisor for a reference? _____ YES _____ NO
If no, please explain: _____

Company: _____ Title: _____
City/State: _____ From: _____ To: _____
Phone: _____ Reason for Leaving: _____
Supervisor: _____
Responsibilities: _____
May We Contact Your Previous Supervisor for a reference? _____ YES _____ NO
If no, please explain: _____

References

Please list three professional references (besides former supervisors listed above) that we may contact for a reference:

| | |
|--------------|----------------------|
| Name: _____ | Title/Company: _____ |
| Phone: _____ | Relationship: _____ |
| Name: _____ | Title/Company: _____ |
| Phone: _____ | Relationship: _____ |
| Name: _____ | Title/Company: _____ |
| Phone: _____ | Relationship: _____ |

Disclaimer and Signature

I certify that the information I am providing on this employment application is true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information I provided on my application or during interview may result in my release.

Signature: _____
Date: _____