PRIVATE & CONFIDENTIAL

THIS APPLICATION MUST BE COMPLETED BY THE JOB APPLICANT IN HIS OR HER OWN HANDWRITING



EMPLOYMENT APPLICATION FORM

(LAR COOPERATIVA AGROINDUSTRIAL IS AN EQUAL OPPORTUNITIES EMPLOYER)

APPLICATION FOR EMPLOYMENT AS:

	seasonal C] ,	FULL TIME	PA	RT TIME	
	of information o	n this application fo	ect to the best of my kr orm may in the event	•		•
APPLICANT'S SIG	GNATURE:			DATE:		

PLEASE RETURN COMPLETED APPLICATION FORM TO:

HUMAN RESOURCES DEPARTMENT, LAR COOPERATIVA AGROINDUSTRIAL, Estrada para Cafelândia, Km 08 S/N Zona Rural S/N - Floresta, Cascavel -PR, 85814-800, Brazil

E: HR@lar-ind.com.br W: www.lar-ind.com.br

PERSONAL DETAILS (BLOCK CAPITALS) (Tick () as Appropriate)



TITLE: NAME:	S	SURNAME:						
ADDRESS:								
CONTACT:	N	MOBILE:						
NATIONALITY:		PPS NO:						
EDUCATION & TRAINING: (Please continue on a separate sheet if necessary)								
NAME OF SCHOOL / COLLEGE	QUALIFICATIONS	SUBJECTS						
WORK EXPERIENCE (Please continue on a separate sheet, if necessary)								
NAME EMPLOYER	DATE	MAIN DUTIES & REASON FOR LEAVING						

GENERAL INFORMATION



CURRENT DRIVING LICENC	E: NO: FULL	□ PROVISIONAL □	CLASS:							
ENDORSEMENTS:	YES: ☐ NO: ☐	If yes, please give details:								
PRESENT SALARY: (incl. Bonus etc.)		NOTICE REQUIRED:								
WHEN ARE YOU AVAILABLE FOR EMPLOYMENT?										
HAVE YOU BEEN EMPLOYED OR PREVIOUSLY SOUGHT EMPLOYMENT WITH THIS COMPANY? YES: ☐ NO: ☐										
HAVE YOU BEEN CONVICTED OF A CRIMINAL OFFENCE? YES: □ NO: □										
If yes, please give details:										
ARE THERE ANY RESTRICT	IONS ON YOUR RIGHT	TO WORK IN THIS COMPANY	?? YES: □	NO: □						
If yes, please give details:										
PLEASE PROVIDE ANY OTH		MATION ABOUT YOURSELF, Y	YOUR EXPERIENCE, AND WH	Y YOU						
•		E NO. OF TWO OF YOUR PREV DE TO PRESENT EMPLOYERS								
Name of Referee	Company	у	Contact No:							