



Food Country USA

An Equal Opportunity Employer

Date _____

Position applied for _____

(Print) Name _____ Home or Cell Phone # _____ SS# _____

Current Address _____ City _____ State _____ Zip _____

Previous Address (if less than a year at previous address) _____

Are you over the age of 18? Yes ___ No ___ (If no, employment is subject to verification that you are of minimum legal age) Are you a citizen of the United States? Yes ___ No ___ (If not a citizen of the U.S. can you provide Form 1-151 or Form 1-94 as proof that you can be legally employed in the U.S.? Yes ___ No ___

Do you intend to remain permanently in the United States? Yes ___ No ___

Positions applied for _____ how soon could you report to work? _____

Type of Employment: Full Time ___ Part Time ___ Temporary ___ Rate of Pay Expected? _____

What days and hours if part time?

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Employment History

Have you applied for a job with us before? Yes ___ No ___ Have you ever worked for us before? Yes ___ No ___

How did you come to apply? Employee Referral ___ Former Employee ___ Newspaper ___ Walk In ___

Other: _____

Have you ever been bonded? Yes ___ No ___ Have you ever been refused bond? Yes ___ No ___

If so, state the reason and date: _____

Have you ever been convicted of a crime except a minor traffic violation? Yes ___ No ___ If so, state date, court and place where offense occurred. _____

Have you ever been discharged or requested to resign from a position? Yes ___ No ___ If so, please explain: _____

Does your present employer know you plan to change employment? Yes ___ No ___

Why do you desire to make a change? _____

Have you ever held a position of trust? (Handling money or confidential material)? Yes ___ No ___

How much time have you lost from work during the past year? _____

Are you willing to submit to pre-employment drug screening? Yes ___ No ___ Are you willing to have random drug testing done at our request? Yes ___ No ___ Are you willing to submit to a criminal background and credit check?

Yes ___ No ___

Education

Type of School	Name/Address of School	Coursed Majored In	Last Year Completed	Graduate?	Give Degrees
Elementary			5 6 7 8		
High School			1 2 3 4	Yes ___ No ___	
College			1 2 3 4	Yes ___ No ___	

Prior Work Record (Start with most recent or present employer)

1. Name, Address & Phone Number or Most Recent Employer

Phone # _____

Immediate Supervisor (Name & Position) _____

Date Hired _____

Starting Rate _____

Your Job Title & Duties _____

Date Left _____

Last Rate _____

Reason for Leaving _____

2. Name, Address & Phone Number of Employer

Phone # _____

Immediate Supervisor (Name & Position) _____

Date Hired _____

Starting Rate _____

Your Job Title & Duties _____

Date Left _____

Last Rate _____

Reason for Leaving _____

Service in U.S. Armed Forces

Have you served in the U.S. Armed Forces? Yes NO

If yes, date active duty started _____ 19__

Which service? _____ What branch of that service? _____

Starting rank? _____ Final rank? _____

Where were your duties? _____

References (Do not list relatives or former employers)

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

I certify that the information given by me in this application is true in all respects, and I agree that if employed and it is found to be false in any way, that I may be subject to dismissal without notice. Policies and rules which are issued are not conditions of employment. I understand that the employer may revise policies or procedures, in whole or in part, at any time, with or without notice. I also understand by signing below, I authorize the company to do a credit check as well.

Signature of Applicant _____

Date _____