



Application for Employment

An Equal Opportunity Employer

Quality Foods is an equal opportunity employer. Quality Foods will not under any circumstance discriminate against a team member or applicant with regard to race, age, sex, national origin, religion, disability, or any other status protected by law.

Please print all information and complete all sections of this application. After completing the application, read the statements on the last page and sign your name. Feel free to attach a resume with this completed application. This application will held on file for 45 days.

Applicant Data

Last Name: _____ First Name: _____ Middle Initial: _____

Social Security Number: _____

Current Address: _____ Apt #: _____

City: _____ State: _____ Zip: _____

How long have you lived at this address? Years: _____ Months: _____

Home Phone Number: (____) _____ Cell Phone Number: (____) _____

Have you worked for Quality Foods before? Yes No

If Yes:

Date Employed: _____ Location: _____ Position: _____

Reason for Separation: _____

Are you presently employed? Yes No

Have you ever been discharged from work? Yes No

Are you currently on a leave of absence or lay off from any company? Yes No

Do you have any relatives working for Quality Foods? Yes No

Are you 18 years of age or older? Yes No



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Are you willing to work: Full Time? Yes No Part Time? Yes No

Weekends? Yes No Evenings? Yes No

Hours you are available to work

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Starting Time							
Ending Time							

Any Shift

What position are you applying for? _____

Desired Salary? _____ Annually Hourly

Are you willing to relocate? Yes No If Yes, Desired Location? _____

Have you ever been convicted of a crime, including Guilty and Nolo

Contendere Pleas? (Do not include traffic violations, sealed, annulled, or expunged records. An answer of yes to the question will not automatically disqualify you from consideration for employment. Factors such as the date and seriousness of the offense, and the relationship between the conviction and the duties/responsibilities of the applied for position will be considered.)

Yes No Offense: _____ When: _____

Have you ever served in the military? Yes No

Branch of Service: _____ Dates: _____

Are you legally eligible to work in the U.S.A? Yes No

If No, can you provide a work permit? Yes No

Will you now or in the future require sponsorship for employment visa status? Yes No



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Education and Training

Name and address of High School, College, University or Technical Training (List most recent first)	Years Completed	Degree, Diploma, or Certificate	Major Field	Degree Received?
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No
				<input type="checkbox"/> Yes
				<input type="checkbox"/> No

Additional Skills and Qualifications

Please list and special skills or qualifications that would enhance tour work at Quality Foods:



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References

Give the names of four references that you have known for at least one year or more.

Name	Address (Street/City/State/Zip)	Phone	Relationship



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Work Experience

List your most recent employers, beginning with the current or most recent employer.

Employer 1				
Company Name:	Starting Date:	Ending Date:	Ending Pay:	Most Recent Job Title:
Street Address:	Supervisors Name:	Describe your job duties and assignments:		
City, State Zip:	Supervisors Title:	Phone Number: ()		
Why did you leave?				
Are you currently working for this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, may we contact this employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Employer 2				
Company Name:	Starting Date:	Ending Date:	Ending Pay:	Most Recent Job Title:
Street Address:	Supervisors Name:	Describe your job duties and assignments:		
City, State Zip:	Supervisors Title:	Phone Number: ()		
Why did you leave?				
May we contact this employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No				



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Work Experience (continued)

Employer 3				
Company Name:	Starting Date:	Ending Date:	Ending Pay:	Most Recent Job Title:
Street Address:	Supervisors Name:		Describe your job duties and assignments:	
City, State Zip:	Supervisors Title:		Phone Number: ()	
Why did you leave?				
May we contact this employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Employer 4				
Company Name:	Starting Date:	Ending Date:	Ending Pay:	Most Recent Job Title:
Street Address:	Supervisors Name:		Describe your job duties and assignments:	
City, State Zip:	Supervisors Title:		Phone Number: ()	
Why did you leave?				
May we contact this employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No				

State reason for any gaps in employment:



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How Did You Hear About Career Opportunities at Quality Foods?

Check all that Apply

Media Advertisement

- | | |
|-------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Newspaper/Job Ad | <input type="checkbox"/> Radio Ad |
| <input type="checkbox"/> Brochure/Handout | <input type="checkbox"/> Direct Mail |

On-Line

- | |
|------------------------------------------------------------------|
| <input type="checkbox"/> Quality Foods Website |
| <input type="checkbox"/> Job Posting Website (Ex: CareerBuilder) |

Store

- | |
|------------------------------------------------|
| <input type="checkbox"/> Store Hiring Sign |
| <input type="checkbox"/> Facility Announcement |

Career Fair

- | |
|-----------------------------------------|
| <input type="checkbox"/> Local Job Fair |
|-----------------------------------------|

Referral

- | | |
|------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Employee | <input type="checkbox"/> Family/Friend |
| <input type="checkbox"/> Community Event | <input type="checkbox"/> School Program |

Career Services

- | | |
|-------------------------------------------|--------------------------------------|
| <input type="checkbox"/> College | <input type="checkbox"/> High School |
| <input type="checkbox"/> Technical School | <input type="checkbox"/> Other |

Notification and Agreement

Important – Please Read and Sign

By signing this application, you indicate that you understand and agree to the following:

Applicant hereby certifies that the answers to the foregoing questions are true and correct. Applicant agrees that if the information is found to be false in any respect, including omission of information, applicant will be subject to dismissal without notice. Applicant authorizes Quality Foods to investigate all information in this application. Applicant hereby authorizes any former employers to release information pertaining to my work record, habits, and performance. Applicant understands that an additional background investigation may be necessary.

Should applicant become an employee of Quality Foods, applicant understands that their employment will be for no definite term, such that applicant will have the right to terminate their employment at any time, at their convenience, with or without cause or reason. Applicant further understands that Quality Foods will have these same rights. Applicant understands that they are expected to comply with all Quality Foods rules and regulations, but that such rules do not create a contract between applicant and Quality Foods. Applicant understands and agrees that any handbook they receive will not constitute an employment contract, but will be a statement of Quality Foods current policies.

Applicant understands that before any offer of employment is finalized, applicant may be required to submit to a background check and drug testing. Applicant also understands that they may be denied employment, or that applicant may be terminated if they have already commenced work, based on the results of the background check and/or drug testing.

Applicants Signature _____ Date: _____

Print: Last Name

First Name

Middle Name

Social Security Number: _____