



APPLICATION FOR EMPLOYMENT

We consider all applicants without regard to race, color, religion, sex, sexual orientation, age, ancestry, national origin, qualified disability, veteran status, or any other basis prohibited by federal or state law. As an equal opportunity employer, Yes! Organic Market fully complies with all federal and state laws and the information requested on this application will not be used for any purpose prohibited by law.

Please Print

Date _____

Name _____ **Social Security No.** _____

Address
_____ **No. of Street** _____ **City** _____ **State** _____ **Zip Code** _____

Phone Number _____ **How long at above address?** _____

Date of Birth _____
Month / Day/Year

Can you furnish documentation that you are authorized to work in the United States? Yes _____ No _____

If you are under the age of 21 give date of birth _____ (before employment you may be required to furnish a work permit and proof of age)

EMPLOYMENT DESIRED

Position _____ **Date Available** _____ **Salary Desired** _____

Have you ever been employed by us? _____ Presently employed _____ May we contact present employer? _____

Do you desire full or part- time work? _____ Desired number of days per week? _____

Please list any relatives or friends employed with us or within the past two years. _____

Do you know of any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommoaiton?

Yes _____ No _____

AVAILABILITY

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Days							
Nights							

SCHOOLS ATTENDED

High School						/
	Name	City	No. Years	Graduated	Yes	No
College						/
	Name	City	No. Years	Graduated	Yes	No
Other						/
	Name	City	No. Years	Graduated	Yes	No

FORMER EMPLOYERS

(List last two employers, starting with last one first.)

Employer:		<u>Employed</u>	Supervisor's Name:	
Address:			From: _____	
Telephone #:			To: _____	
Your Salary		Duties:		
Start	End			

Reason for Leaving:

Employer:		<u>Employed</u>	Supervisor's Name:	
Address:			From: _____	
Telephone #:			To: _____	
Your Salary		Duties:		
Start	End			

Reason for Leaving:

Please complete the following test.

- | | | |
|-----------------------------------------|---------------------------|---------------------------------|
| $2 \times 5 = (\quad)$ | $5 \times 5 = (\quad)$ | $\$50.00 - \$13.50 = (\quad)$ |
| $7 \times 5 = (\quad)$ | $10 \times 2 = (\quad)$ | $\$13.00 - \$8.75 = (\quad)$ |
| $10 \times 20\% = (\quad)$ | | $\$12.00 - \$5.50 = (\quad)$ |
| $12 / 3 = (\quad)$ | $100 / 10 = (\quad)$ | $\$27.00 - \$5.50 = (\quad)$ |
| $10 / 2 = (\quad)$ | | $\$7.00 + \$5.50 = (\quad)$ |
| What is 10% of \$20? . (\quad) | | |

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you

I understand and agree that, if hired, I must complete a 90 day probationary period. During this probationary period, either party may terminate employment without cause. After the probation is complete, continued employment is dependent upon successful performance of the employee and the company.

Date

Signature