

Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the General Manager, District Manager or Corporate Office.

Location							
Position(s) applie	ed for			Date of application	/	/	
Referral Source	Advertisement	☐ Employment	☐ Relative	Person			
	☐ Walk-in	☐ Private Employment A	agency	Other	Other		
Name							
	LAST	FIRST			MIDDLE		
Address		OTEN OF THE PERSON OF THE PERS	GYP GODE	Social Security #	<u> </u>		
Telephone #(STREET)	CITY STATE Mobile/Beeper/Other Phone #(ZIP CODE)	E-mail Addr	ess		
						AN	
If necessary, best ti	ime to call you at home	is			_ :	Pl	
May we contact you at work?							
If yes, work numbe	er and best time to call		()		_ :	PM	
If you are under 18	and it is required, can	you furnish a work permit?			Yes		
If no, please explai	n						
Have you previous	ly been employed by M	Iarket Broiler Restaurants or Provid	er Contract Food	Services? Yes	☐ No		
If yes provide dates	s	<u>.</u>					
If yes, did you prov	vide notice of your resig	gnation of employment from Marke	t Broiler Restaura	nts or Provider Contrac	et Food Servic	es?	
Are you legally eligible for employment in this country?						□ No	
Date available for v	work//	_ What is your desired wage / sala	ry range? \$	per			
Type of employme	ent desired [Full Time Part	Time [Temporary	☐ Season	al	
Will you relocate it	f job requires it?				_ Yes	□ No	
Can you perform th	ne functions of this job	(essential and/or marginal), with/wi	thout reasonable a	accommodation?	☐ Yes	□ No	
Will you work over	rtime if required?				Yes	□ No	
If no, please explai	n						

EMPLOYER		TELEPHONE # ()		SUMMARIZE THE TYPE OF WORK PERFORMED AND JORESPONSIBILITIES
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE				
IMMEDIATE SUPERVISOR AND TITLE				
DATES EMPLOYED: FROM:		/ TO:		
REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCE?	☐ YES	□ NO	LATER	
EMPLOYER		TELEPHONE #		SUMMARIZE THE TYPE OF WORK PERFORMED AND JORGESPONSIBILITIES
ADDRESS				
STARTING JOB TITLE / FINAL JOB TITLE				
IMMEDIATE SUPERVISOR AND TITLE				
DATES EMPLOYED: FROM:		/ TO:		
REASON FOR LEAVING				
MAY WE CONTACT FOR REFERENCE?	YES	□ NO	LATER	
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REASON FOR LEAVING		,		
MAY WE CONTACT FOR REFERENCE?	YES	□ NO	LATER	
EMPLOYER		TELEPHONE #		SUMMARIZE THE TYPE OF WORK PERFORMED AND J RESPONSIBILITIES
ADDRESS		,		
STARTING JOB TITLE / FINAL JOB TITLE				
IMMEDIATE SUPERVISOR AND TITLE				
DATES EMPLOYED: FROM:		/ TO:		
		/ 10.		
REASON FOR LEAVING MAY WE CONTACT FOR REFERENCE?	YES	□ NO	LATER	
			_	

Employment History

A: List the last three (3) schools attended, starting with most recent. B: List number of years completed. C: Indicate degree or diploma earned, if any. D: Grade Point Average or Class Rank. E: Major field of study. F: Minor field of study (if applicable).

A. S	SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

Skills and Qualifications		
Summarize any special training skills, licenses and/or certificates that may position for which you are applying.	qualify you as being able to perform job-rel	ated functions in the
References		
List name and telephone number of three business/work references who are pplicable, list three school or personal references who are not related to you		supervisors. If not
NAME	TELEPHONE	NUMBER OF YEARS KNOWN
	()	
	()	
	()	
ist any additional information you would like us to consider,		,
Applicant Statement		
certify that all information provided in order to apply for and secure work	with the employer is true, complete and cor	rect.
understand that any information provided by me that is found to be falsause to (i) cancel further consideration of this application, or (ii) immed liscovered.		
expressly authorize, without reservation, the employer, its representative eferences (personal and professional), employers, public agencies, licensi	ng authorities and educational institutions	and to otherwise ve

the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the end of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

It is my understanding that MARKET BROILER is an at-will employer and by understanding this it has been explained to me that if I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.							
I certify that I have read, fully understand and accept all terms of the foregoing Applicant St	atement.						
Signature of Applicant	Date/	<u>/ .</u>					