

EMPLOYMENT APPLICATION

PERSONAL INFORMATION (please print)

Name Last First Middle Date (M/D/Y)

Other names you are known by _____ Are you less than 18 years of age? Yes No
(Foodstuffs is required to comply with federal, state, or provincial law.)

Have you been convicted of a crime in the last seven (7) years? Yes No

If yes, list convictions that are a matter of public record (arrests are not convictions). A conviction will not necessarily disqualify you for employment.

Present Address Street City State/Province Zip Code/Postal Code

Permanent Address Street City State/Province Zip Code/Postal Code

Phone Number Daytime/Cell Evening Referred By

EMPLOYMENT DESIRED (If you are applying for a retail hourly position, please keep in mind that the availability of hours may vary.)

Position Location/Department Date You Can Start Salary Expectation

Specify hours available for each day of the week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Are you able to work overtime? _____

Have you ever worked for Foodstuffs? _____ If yes, when? _____ Which store/department? _____

EDUCATION

	Name and Location of School	Circle last year completed	Did you Graduate?	Subjects Studied and Degrees Received
High school		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Post College		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

List skills relevant to the position applied for:

Have you ever visited a Foodstuffs location? Where? Describe your experience. _____

What do you like about food? _____

Why would you like to work for Foodstuffs? _____

Describe a specific situation where you have provided excellent customer service in your most recent position. Why was this effective? _____

FORMER EMPLOYERS (List below current and last two employers, starting with most recent one first.)

Date: Month/Year	Current Employer (name, address, type of business)	Salary	Position	Reason for leaving
From		Starting		
To		Ending		
Duties Performed				
Supervisor's Name		Phone Number	May we contact?	

Date: Month/Year	Previous Employer (name, address, type of business)	Salary	Position	Reason for leaving
From		Starting		
To		Ending		
Duties Performed				
Supervisor's Name		Phone Number	May we contact?	

Are you capable of lifting 20 lbs.? If not, please explain. _____

Are you able to stand on your feet for extended periods of time? If not, please explain. _____

Do you have any problems bending down? If so, please explain. _____

REFERENCES (Give below the name of two persons not related to you, whom you have known for at least one year.)

Name	Address and Phone	Business	Position	Relationship

I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and resume, if any) to provide any relevant information that may be required to arrive at an employment decision and I release all persons, schools, employers, of any and all claims for presentation or omission of facts may result in dismissal. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Foodstuffs to hire me. I acknowledge that employment with Foodstuffs is "At-Will" and the company retains the absolute right to end my employment for any due reason with or without cause.

Date: _____ Signature: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER COMMITTED TO HIRING A DIVERSE WORKPLACE.