

WHITLEY'S PEANUT FACTORY APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied For:		Date:		
How did you learn about us?				
<input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____				
Last Name		First Name		Middle Name
Address	Number	Street	City	State Zip Code
Telephone Number(s)			Email Address	

Best time to contact you at home is:_____

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? If Yes, give date..... Yes No

Have you ever been employed with us before? If Yes, give date..... Yes No

Do any of your friends or relatives, other than your spouse, work here? Yes No
 If, Yes state name, relationship and location _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
 Proof of citizenship or immigration status will be required upon employment..... Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Have you ever been convicted of a felony? Yes No
 If Yes, Explain _____

The answer will not necessarily disqualify you from employment.

When are you available to work: _____

EDUCATION

School	Name & Address of School	No. of Years Completed	Year Grad/ GED	Diploma/Degree
High school				
Undergraduate School				
Graduate/Professional				
Other (specify)				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application, including any job related training in the U.S. Military.

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. Exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

#1 Employer	DATES EMPLOYED		Work Performed
	FROM	TO	
Address			
Telephone Number(s)	HOURLY RATE/SALARY		
	STARTING	FINAL	
Starting/Present Job Title			
Supervisor			
Reason for leaving			May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
#2 Employer	DATES EMPLOYED		Worked Performed
	FROM	TO	
Address			
Telephone Number(s)	HOURLY RATE/SALARY		
	STARTING	FINAL	
Starting/Present Job Title			
Supervisor			
Reason for leaving			May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No
#3 Employer	DATES EMPLOYED		Worked Performed
	FROM	TO	
Address			
Telephone Number(s)	HOURLY RATE/SALARY		
	STARTING	FINAL	
Starting/Present Job Title			
Supervisor			
Reason for leaving			May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES Do not include family members or past supervisors

Name	Phone Number	Best time to call	Occupation
1.			
2.			
3.			

APPLICANTS STATEMENT

I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant _____

Date _____