



Employment Application

Position Sought: _____ How did you learn about the position? _____

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Cell Phone: _____ Email _____

Home Phone: _____ Other Phone: _____

Date Available: _____ Desired Wage/Salary: \$ _____ Social Security No.: _____

Are you available for all shifts? YES NO If no, please indicate hours of availability.

Monday: From: _____ To: _____ Friday: From: _____ To: _____
 Tuesday: From: _____ To: _____ Saturday: From: _____ To: _____
 Wednesday: From: _____ To: _____ Sunday: From: _____ To: _____
 Thursday: From: _____ To: _____

Have you ever interviewed or applied at The Market before? YES NO

If yes, when: _____

Do have relatives and/or friends employed by The Market? YES NO

If yes, who: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S. without restrictions? YES NO

Have you ever been involuntarily terminated or asked to resign from any position of employment? YES NO

If yes, explain: _____

If selected for employment, are you willing to submit to a pre-employment drug screening test? YES NO

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Certification(s) and Skills

Do you have a California Food Handler Card? YES NO

Use the space below to summarize any additional information necessary to describe your full qualification for the position you are applying for.

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list two professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Applicant Statement

I authorize the investigation of all matters contained in this application and hereby give permission to contact schools, previous employers, references, and others in order to verify the facts and information furnished with regard to my character and qualifications, and hereby release and indemnify H&W Market, Inc. (hereafter called The Company) from any claims or liability as a result of such contact. I also hereby release employers, schools, and other persons from all liability in responding to inquiries in connection with this application. I understand that misrepresentations, omissions of facts or incomplete information requested in this application may remove me from further consideration for employment. In addition, if employed, any misrepresentations or omissions of facts called for in this application will be cause for dismissal at any time without any previous notice.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Company 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. I further understand that an oral promise, policy, custom, business practice or other procedure (including any employee handbook or any personnel manuals) does not constitute an employment contract or modification of the at-will employment relationship between The Company and me. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing and executed by the President of the Company.

The contents of any employee handbook or personnel manuals are subject to change or modification, without notice.

The Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, age, religion, national origin, disability, sexual orientation, or marital status. We assure you that your opportunity for employment with The Company depends solely upon your qualifications. I understand that The Company does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application will remain on file for 45 days. At the conclusion of that time, if I have not heard from The Company and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

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

This company complies with the Americans with Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job-related functions. If you are given a conditional offer of employment, you may be required to complete a post-job offer medical history questionnaire and undergo a medical examination. All entering employees in the same job category will be subject to the same medical questionnaire and examination, and all information will be kept confidential.

The protection of confidential business information and trade secrets is vital to the interests and the success of the Company. Employees must respect and maintain the confidentiality of such information they learn about the Company, its owners, customer, vendors and its employees in the course of performing their jobs. Such information includes, but is not limited to: compensation data, vendor information, customer lists, customer preferences, financial information, marketing strategies, medical records, medical information, or other confidential information relating to the Company, its owner, customers, vendors or employees.

Signature of Applicant

Date