

# CONNER'S SUPERMARKET

## EMPLOYMENT APPLICATION

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE PRINT ALL RESPONSES)

DATE: \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TYPE OF POSITION DESIRED: \_\_\_\_\_

FULL TIME, PART TIME, OR TEMPORARY: \_\_\_\_\_

PLEASE INSERT TIMES ON EACH DAY YOU WOULD BE AVAILABLE FOR WORK.

MON. \_\_\_\_ TUES. \_\_\_\_ WED. \_\_\_\_ THURS. \_\_\_\_ FRI. \_\_\_\_ SAT. \_\_\_\_ SUN. \_\_\_\_

HOW SOON WOULD YOU BE AVAILABLE FOR WORK: \_\_\_\_\_

SALARY REQUIRED: \_\_\_\_\_

ARE YOU 14 OR OLDER: \_\_\_\_\_ 16 OR OLDER: \_\_\_\_\_ 18 OR OLDER: \_\_\_\_\_

PRIMARY LANGUAGE – ENGLISH \_\_\_\_ OTHER \_\_\_\_\_

ARE YOU ABLE TO LIFT 25LBS: \_\_\_\_\_ 50LBS: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES \_\_\_\_ NO \_\_\_\_

IF YES, GIVE FULL PARTICULARS: \_\_\_\_\_

FOR EACH TYPE OF SCHOOL YOU HAVE ATTENDED, PLEASE LIST THE SCHOOLS NAME, THE LAST YEAR YOU COMPLETED, AND INDICATE IF YOU GRADUATED

GRADE SCHOOL: \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

COLLEGE: \_\_\_\_\_

BUSINESS OR TRADE SCHOOL: \_\_\_\_\_

SPECIAL TRAINING: \_\_\_\_\_

WHAT TYPES OF BUSINESS MACHINES DO YOU OPERATE? \_\_\_\_\_

HAVE YOU EVER BEEN DISCHARGED FROM ANY POSITION? YES \_\_\_ NO \_\_\_

IF YES, EXPLAIN: \_\_\_\_\_

EMPLOYMENT EXPERIENCE / WORK HISTORY

START WITH YOUR PRESENT OR YOUR LAST EMPLOYER. IF YOU NEED MORE SPACE, USE AN EXTRA SHEET OF PAPER. IF SUMMER OR PART TIME WORK, PLEASE INDICATE.

NAME OF EMPLOYER: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

SUPERVISOR/TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_

STARTING PAY: \_\_\_\_\_ LEAVING PAY: \_\_\_\_\_

YOUR TITLES AND DUTIES: \_\_\_\_\_

\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

NAME OF EMPLOYER: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

SUPERVISOR/TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_

STARTING PAY: \_\_\_\_\_ LEAVING PAY: \_\_\_\_\_

YOUR TITLES AND DUTIES: \_\_\_\_\_

\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

NAME OF EMPLOYER: \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_

CITY & STATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

SUPERVISOR/TITLE: \_\_\_\_\_

STARTING DATE: \_\_\_\_\_ LEAVING DATE: \_\_\_\_\_

STARTING PAY: \_\_\_\_\_ LEAVING PAY: \_\_\_\_\_

YOUR TITLES AND DUTIES: \_\_\_\_\_

\_\_\_\_\_

REASON FOR LEAVING: \_\_\_\_\_

ARE WE GRANTED PERMISSION TO CHECK ALL INFORMATION? YES \_\_\_ NO \_\_\_

EMPLOYERS WHOM YOU **DO NOT** WISH US TO CONTACT? \_\_\_\_\_

I CONSENT TO A CRIMINAL BACKGROUND CHECK - YES \_\_\_ NO \_\_\_

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT DELIBERATE FALSIFICATION OF THIS INFORMATION IS GROUNDS FOR DISMISSAL IN ACCORDANCE WITH THIS COMPANY'S POLICY.

SIGNATURE OF APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_