

## APPLICATION FOR HOURLY POSITIONS

Date \_\_\_\_\_

Name \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Alternate Phone Number \_\_\_\_\_

Have you ever been employed by Grazies? \_\_\_\_\_

If yes, dates and locations? \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Do you have any relatives who are employed by the Company? \_\_\_\_ Yes \_\_\_\_ No If yes, state name(s) and relationship(s)

Position Desired \_\_\_\_\_ Date you can start \_\_\_\_\_ Salary desired \_\_\_\_\_

Will you work Nights? \_\_\_\_\_ Weekends? \_\_\_\_\_ Full Time? \_\_\_\_\_ Part Time? \_\_\_\_\_

Are you eligible to work in the United States? \_\_\_\_ Yes \_\_\_\_ No

Are you willing to relocate? \_\_\_\_\_

If you are under 18 years of age, state your age \_\_\_\_\_ if so, proof of age is required prior to employment.

## EDUCATION AND TRAINING

High School Name / Address	Diploma ____yes____no	If no, highest grade completed?
College Name / Address	Degree ____yes____no	Major:
Business / Technical / Other School Name / Address	Area of Study:	

List any other skill or honors which have a direct bearing on the job for which you are applying:

**CURRENT OR MOST RECENT EMPLOYER** May we contact you current employer about this application? \_\_\_\_ Yes \_\_\_\_ No

Company \_\_\_\_\_ Type of business \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**WHEN STARTED**

**WHEN LEFT OR CURRENT**

Last Supervisor's Name

Date \_\_\_\_\_ Date \_\_\_\_\_

Salary \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's phone # \_\_\_\_\_

Job description \_\_\_\_\_ Job description \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**PREVIOUS EMPLOYER**

Company \_\_\_\_\_ Type of business \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**WHEN STARTED**

**WHEN LEFT OR CURRENT**

Last Supervisor's Name

Date \_\_\_\_\_ Date \_\_\_\_\_

Salary \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's phone # \_\_\_\_\_

Job description \_\_\_\_\_ Job description \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**PREVIOUS EMPLOYER**

Company \_\_\_\_\_ Type of business \_\_\_\_\_

Address \_\_\_\_\_ Phone Number \_\_\_\_\_

**WHEN STARTED**

**WHEN LEFT OR CURRENT**

Last Supervisor's Name

Date \_\_\_\_\_ Date \_\_\_\_\_

Salary \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's phone # \_\_\_\_\_

Job description \_\_\_\_\_ Job description \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**REFERENCES:** List below the names of three persons (not employers or relatives) whom you have known for at least one year.

NAME	ADDRESS	PHONE #	OCCUPATION	YEARS ACQUAINTED



Have you ever been convicted of a felony or misdemeanor, or pled "Nolo contendere" (i.e. no contest) to any criminal charge in the past 10 years? \_\_\_\_ Yes \_\_\_\_ No

If yes, please state nature of offense, when, where and disposition \_\_\_\_\_

If you answered the above question yes, was your conviction due to a plea to a lesser charge or offense? \_\_\_\_ Yes \_\_\_\_ No

Explain: \_\_\_\_\_

A conviction record will not necessarily be a bar to employment. This information will be considered for job-related purposes and only to the extent permitted by applicable law.

## CONSENT TO DISCLOSURE OF INFORMATION

Please read carefully and sign the statement below.

Pursuant to Company policy, I hereby grant permission to the Company to investigate my employment, educational, and personal background and character references. I release all persons who furnish such information to the Company from all liability and damages. I acknowledge and understand that I have hereby received notice in compliance with the Fair Credit Reporting Act that the Company may seek to procure a consumer report or an investigative consumer report regarding my credit worthiness, credit history, credit capacity, character, general reputation, personal characteristics or mode of living from a consumer reporting agency. I understand that upon my written request the Company shall make a complete and accurate disclosure of the nature and scope of such investigation if one is made. I also understand that if my employment is denied because of such a report, I can submit a written request to obtain the name and address of the agency supplying the report. As allowed by law, I also agree to submit to random drug tests and other investigative interviews, methods or tests conducted by the Company and I understand that the results of such tests may be used as evidence in legal or administrative proceedings and may also be used in considering my status for continued employment and as a basis for rejecting my application or terminating my employment.

I hereby authorize persons, schools, businesses, current and previous employers and organizations to provide any and all information that any of them may possess concerning or relating to me and that may be required for any employment decisions by the Company. A photocopy of this form may be used, if required, for purposes of establishing authorization to disclose information about me.

I also understand that giving incomplete or false information in my application for employment is a serious matter and is grounds for termination and forfeiture of related benefits.

Upon acceptance of employment with the Company, I agree to follow all the policies, procedures, rules and regulations of the company. I understand that I can leave the Company with or without notice and with or without cause, and the company reserves the same rights. I understand that nothing contained in this application, any manual, brochures, or other Company materials shall constitute a contract or implied contract of employment.

I also agree to full release of liability to the Company for providing references to all potential employers in the event of my termination.

**I CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND COMPLETE AND IS SUBJECT TO CONFIRMATION BY THE COMPANY.**

I understand that the information contained herein is to be used in a confidential manner.

Signature \_\_\_\_\_ Date \_\_\_\_\_