

# **Employment Application**

Belair Produce is an Equal Opportunity Employer. Applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

# Personal Information

Full Legal Name		
Last	First	Middle
Social Security No	Home Phone	
Address		
City	State	Zip
Employment Desired		
Position you are applying for		
When will you be available to start work?		
Salary desired		
Have you ever applied for employment before w	<i>i</i> ith Belair Produce? 🗖 Yes 🗖 No 🕔	When?
How did you find out about this employment op	portunity? (check one)	
□ Newspaper or Trade publication □ Recruit	er 🗖 Other (please specify)	
Referral 🗖 Yes 🗖 No If referred, by whor	n?	
Are you currently employed? 🗖 Yes 🛛 No	Ilf so, may we contact your present supe	ervisor? 🛛 Yes 🗖 No
Business Contact/Phone		
Education		
Check highest grade completed 🗖   🗖 2 🗖 3	<b>0</b> 4 <b>0</b> 5 <b>0</b> 6 <b>0</b> 7 <b>0</b> 8 <b>0</b> 9 <b>0</b> 10	<b>D</b>    <b>D</b>  2
If you did not complete high school, do you have	e a high school equivalency diploma (GED	)? 🗖 Yes 🗖 No
Check number of years of post high school educ	ation 🗖 I 🗖 2 🗖 3 🗖 4 🗖 5 🗖 6 (	<b>1</b> 7
Name and Location of University		
Dates Attended		
Degree Received	Major	

### **Employment History**

Starting with the most recent, describe ALL paid, military and/or applicable voluntary experience. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position. Start with your present employer first.

Employer's Name & Address	
Job Title & Duties	
Type of business	Phone
Start date	End date
Salary	Reason for leaving
Employer's Name & Address	
Job Title & Duties	
Type of business	Phone
Start date	End date
Salary	Reason for leaving
Employer's Name & Address	
Job Title & Duties	
Type of business	Phone
Start date	End date
Salary	Reason for leaving

# **General Information**

Additional information you think would help us evaluate your application, including training, seminars, workshops, and special achievements or specialized skills:

Automated word processing (specify equipment)	
Typing speed words per minute	Shorthand speed words per minute
Licensing special driver's license, certificate or other authorization to pract ized equipment.	
U.S. Military or Naval Service	Rank

Present Membership in the National Guard or Reserves\_\_\_\_\_

#### References

List names, addresses and relationships of three persons not related to you who know your qualifications:

Name & Address		
Phone	Relationship	Years Acquainted
Name & Address		
Phone	Relationship	Years Acquainted
Name & Address		
Phone	Relationship	Years Acquainted

#### Miscellaneous

Check which shifts you will accept: Day Devening	Night  Rotating Weeke	nds
Do you have your own transportation to and from works	? 🗖 Yes 🗖 No	
For purposes of compliance with The Immigration Reform States?  Tes  No	n and Control Act, aare you legally	eligible for employment in the United
Under the Immigration Reform and Control Act of 1986, be employed and verifying your identity. Further, you will b		
Have you ever been found guilty and convicted for any vi	olation(s) of law, including moving	traffic violations? 🗖 Yes 🛛 🗖 No
If YES, please provide the following:		
Description of offense	Date of Charge	Date of Conviction
County, City, State of Conviction		

I hereby certify that all entries on this application and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of the Belair Produce. I understand that all information on this application is subject to verification and I consent to criminal history background checks. In consideration of my employment, I agree to conform to the company's rules and regulations and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or with out cause, and with or without notice, at any time by the company. I understand that no company representatives other than its president, and then only when in writing and signed by the president has any authority to enter in to any agreement for employment foe any specific period of time, or to make any agreement contrary to the foregoing.

Date	Applicant Signature
For Office Use Only	
Interviewed by	
Remarks	
Neatness	Ability
Hired 🛛 Yes 🗖 No	Position/Department
Salary/Wage	Date of Hire
Approved by	
Operations Manager	Department Manager

# Please fax completed applications to 410-782-8009