



Fulton Provision Co.

A Sysco Foods Company

16123 NE Airport Way
Portland, Oregon 97230
503-254-3000
Website: www.fultonprovision.com

APPLICATION FOR EMPLOYMENT

“Equal Opportunity/Affirmative Action Employer”

All applicants will receive consideration for employment without regard to race, color, religion, gender, national origin, age, disability, or veteran status.

- Any offer of employment is contingent upon successfully passing a pre-employment drug screen (and physical capacities test for certain positions.)
- Persons under 18 years of age must be able to verify age by supplying the appropriate documentation such as a birth certificate or hospital birth record, driver's license or state picture ID card, passport, alien registration card with picture, or a baptism record that includes the minor's date of birth.
- If you need an accommodation to participate in the application process (E.G., taking a pre-employment test or participating in an interview), you may request such an accommodation. However, it would be helpful if you inform us of your need for an accommodation within a reasonable time before that part of the application process begins.
- According to federal law, if you are hired, you must bring with you on your first day of work the appropriate original document(s) verifying your identity and showing eligibility for employment. If you are offered a job you will be told what the appropriate documents are. Your failure to bring these documents will delay your entry onto the payroll. Further, the law precludes continuing employment if the documents are not provided in a timely fashion.

INSTRUCTIONS FOR COMPLETING THE APPLICATION

- **To be considered for employment at Fulton, all applicants must complete the employment application in full. Your resume will not be accepted in lieu of an application. Any information you submit in addition to the application (i.e. resume) must be true and complete.**
- Page 2 is a “Voluntary Self-Identification” section. Please read the purpose of the section carefully. **This will be detached from the application before the application is reviewed for employment consideration.**
- **Unsigned or incomplete application will not be processed.**
- An application must be completed in full for each position of interest.



In an effort to evaluate our selection process and to meet Government reporting requirements, we request that you complete this form. The data you provide is to be used solely for reporting, research, statistical purposes, and to comply and monitor compliance with legal requirements. You are not required to answer any of these questions; however, your voluntary cooperation will be appreciated. Failure to complete this form will not affect the decision concerning your employment application.

1. For what position are you applying?

2. Name Last

First

Middle

3. Sex

☐ Male

☐ Female

6. Answering the following questions will help us meet our record-keeping requirements for the U.S. Department of Labor, the EEOC and our Affirmative Action Program.

ETHNIC BACKGROUND (Please Check Only One In This Section)

☐ **White** – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

☐ **Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand, and Vietnam.

☐ **American Indian or Alaskan Native** – A person having origins in any of the original peoples of North American and South America (including Central America), who maintains tribal affiliation or community attachment.

☐ **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

☐ **Black or African American** – A person having origins in any of the Black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

☐ **Hispanic or Latino (White race only)** – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the White race.

☐ **Hispanic or Latino (all other races)** – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of any race other than White.

PLEASE CHECK ALL THAT APPLY (See list of “Campaigns & Expeditions Which Qualify For Veterans’ Preference”)

☐ **Veteran of the Vietnam-Era**: Served on active duty for a period of more than 180 days, and was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty occurred: (I) in the Republic of Vietnam between February 28, 1961 and May 7, 1975; or (II) between August 5, 1964 and May 7, 1975 in all other cases.

☐ **Other Eligible Veteran**: (1) A veteran with active duty (at least 180 days) service of a campaign or expedition for which a campaign badge has been authorized.

☐ **Newly Separated Veteran**: A veteran who served on active duty in the U. S. military, ground, naval or air service during the one-year period beginning on the date of such veteran’s discharge or release from active duty.

☐ **No Military Service**

From what source did you learn about this vacancy?

☐ Employee Referral:
Name of Employee _____

☐ Advertisement:
Name of Publication _____

☐ Online Listing
(name website) _____

☐ Walked In

☐ College/University/Trade/Vocational School
School Name _____

☐ Community or Professional Organization:
Name of Organization _____

☐ Job Fair _____

☐ Other source (please specify):

EMPLOYMENT HISTORY *CONTINUED ON NEXT*

EMPLOYMENT HISTORY CONTINUED

| | | | | | | |
|---------------------------|--|-------------------------|--|--|--|---|
| FROM MO YR | | TO MO YR | | EMPLOYER'S NAME AND COMPLETE ADDRESS (COMPANY NAME, STREET NO., CITY, STATE, AND ZIP CODE) | | |
| STARTING SALARY \$ PER | | ENDING SALARY \$ PER | | YOUR JOB TITLE: | | IMMEDIATE SUPERVISOR: TELEPHONE () |
| DESCRIPTION OF DUTIES: | | | | | | |
| | | | | | | |
| REASON FOR LEAVING: | | | | | | |
| FROM MO YR | | TO MO YR | | EMPLOYER'S NAME AND COMPLETE ADDRESS (COMPANY NAME, STREET NO., CITY, STATE, AND ZIP CODE) | | |
| STARTING SALARY \$ PER | | ENDING SALARY \$ PER | | YOUR JOB TITLE: | | IMMEDIATE SUPERVISOR: TELEPHONE () |
| DESCRIPTION OF DUTIES: | | | | | | |
| | | | | | | |
| REASON FOR LEAVING: | | | | | | |

SPECIALIZED SKILLS AND KNOWLEDGE

| | |
|--|---|
| LIST ANY ACHIEVEMENTS OR ACTIVITIES THAT YOU CONSIDER RELEVANT TO YOUR ABILITY TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING, SUCH AS: AWARDS RECEIVED, MEMBERSHIPS OR OFFICES HELD IN PROFESSIONAL ORGANIZATIONS, LICENSES HELD, COMPUTER LANGUAGES OR SOFTWARE PROGRAMS, FOREIGN LANGUAGES (PROFICIENCY IN SPEAKING AND WRITING), ETC. | |
| PLEASE CHECK ALL CATEGORIES THAT APPLY | SOFTWARE: <input type="checkbox"/> MS WORD <input type="checkbox"/> MS EXCEL <input type="checkbox"/> MS OUTLOOK <input type="checkbox"/> MS ACCESS <input type="checkbox"/> 10-KEY <input type="checkbox"/> IBM AS400 OTHER MACHINES REQUIRING SPECIAL SKILLS: |

EDUCATION AND TRAINING INFORMATION

| EDUCATION | NAME OF SCHOOL | LOCATION CITY/STATE | FROM MO./YR. | TO MO./YR. | DEGREES CONFERRED |
|----------------------------------|----------------|------------------------|-----------------|---------------|----------------------|
| HIGH SCHOOL | | | | | |
| COLLEGE(S) | | | | | |
| OTHER SCHOOL(S) (TRADE, ETC.) | | | | | |
| MAJOR STUDIES | | MINOR STUDIES | | | |

Employment Release and Verification Statement: PLEASE CHECK BOXES AFTER READING:

- ☐ **I understand** that this application and any attachment are the property of FULTON Provision Company (the Company).
- ☐ **I authorize** FULTON to investigate my past employment or education and any other matters that FULTON deems relevant. I authorize you to request and receive such information and I release all such parties from all liability for any damage that may result from furnishing such information to you. I also release FULTON from all liability, which might result from making the investigation.
- ☐ **Any offer of employment** tendered me is based upon my agreement to abide by the rules and regulations of FULTON and acknowledgement that such rules and regulations may be changed, interpreted, or withdrawn by FULTON at any time without prior notice to me. I understand that this application is not an employment contract and, as such, does not guarantee nor imply permanent employment. I understand that if offered employment, said employment is "at will", and employment may be discontinued by either FULTON or me at any time.
- ☐ **I understand** that any offer of employment is subject to a pre-employment drug and/or alcohol screen. I agree to such testing at the company's expense and I authorize release of the results and their use to evaluate my suitability for employment. I understand that, if employed, I may be required to submit to testing in several different circumstances. I also release FULTON from all liability arising out of or connected with any examinations, inquiries and/or testing. Ask to see a copy of our employee alcohol and drug policy if you have any questions.
- ☐ **I understand** that I must inform the Company about any of my relatives who work for a direct competitor of FULTON in the food service industry prior to any offer of employment. This information does not automatically disqualify me for employment, but will be reviewed by the Company who will determine if a conflict of interest exists. Failing to disclose this information prior to employment may result in termination.

CERTIFICATION AND SIGNATURE:

- ☐ **I certify** that the statements made by me in this application and any attachments, supplemental documents or interviews are true, complete, and correct to the best of my knowledge and are made in good faith. I hereby grant FULTON permission to contact any person or entity for the purpose of confirming the information contained in this application and any attachments, supplemental documents or interviews. I understand that falsification of any statement or omission of information made by me on this application process may disqualify me for further consideration for employment and generally will result in denial of employment or termination, regardless of when and how discovered.
- ☐ **I certify** that I am not listed as debarred, suspended, or otherwise ineligible for Federal programs as set forth in the list of Parties Excluded From Federal Procurement Programs publications.
- ☐ **FULTON Provision Company** appreciates and respects the relationship that exists between our customers and their employees. I am aware that if I am an employee of a current customer of FULTON, on the date of completion of this application, I must inform my employer that I am seeking employment with FULTON and receive his/her approval prior to any interview. I understand that failure to inform my customer employer is sufficient grounds to stop the interview process at any time, will void any offer of employment, and is grounds for termination. If I currently work for a prospective customer, supplier, or broker of FULTON, I must inform my employer that I am seeking employment with the Company prior to any offer of employment.
- ☐ I have read each statement contained in the employment release and verification statement. I have also reviewed all of the information contained in the application and attachments and I verify that all information provided by me is true and complete.

Signature of Applicant: _____

Date _____



**PLEASE READ THIS NOTICE AND CONSENT FORM VERY CAREFULLY
BEFORE SIGNING. YOU WILL BE PROVIDED WITH A COPY OF THIS
FORM AT ANY TIME UPON REQUEST**

NOTIFICATION OF REQUEST FOR BACKGROUND / CONSUMER REPORT

This document notifies you that FULTON PROVISION COMPANY will request a background/consumer report about you for the purpose of evaluating you for employment, promotion, reassignment, or retention as an employee. FULTON PROVISION COMPANY may make this request at any time during your employment.

By signing this document, you authorize the request of a background/consumer report by FULTON PROVISION COMPANY. This Authorization is required to be considered for employment and shall remain on file and serve as an ongoing authorization for FULTON PROVISION COMPANY to request background investigations/consumer reports at any time during your employment period.

I, _____ (**Print Name Here**), authorize FULTON PROVISION COMPANY.
to request a background/consumer report about me for the purpose of evaluating me for employment,
promotion, reassignments, or retention as an employee.

SIGN HERE

DATE