PRICE CHOPPER APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability or any other legally protected status.

| NAME | | | | | | |
|------------------------|-------------------|-----------------|--------------------|-------------------|-------------------|--|
| | (FIRST) | | (MIDDLE) | (LAST) | | |
| PRESENT ADI | DRESS | STREET | CITY | STATE | ZIP | |
| TELEBLIONE N | | | | | | |
| | NUMBER () | | | /IREK | | |
| ARE YOU UND | DER THE AGE OF 18 | ? YESNO | · | | | |
| IF HIRED, ON | WHAT DATE WILL Y | OU BE AVAILABLE | TO WORK ? | | | |
| DO YOU KNO\ YES NO_ | W ANYONE OR HAV | E ANY RELATIVES | EMPLOYED BY TH | IIS COMPANY? | | |
| | (NAME | (i) | (RELATIONSHIP) | | (WHICH LOCATION?) | |
| | | EDUCA | TION | | | |
| | NAME & LOCATION | YEARS COMPLETED | DID YOU GRADUATE? | DEGREE OR COUR | SE OF STUDY | |
| HIGH SCHOOL | | _ 9 10 11 12 | | - | | |
| | | _ | | | | |
| COLLEGE | | _ 123456 | | | | |
| | | _ | | | | |
| OTHER | - | - | | | | |
| WHAT PROMF | PTED YOUR APPLIC | ATION? AGENCY O | WN ACCORD EMPLOYEE | REFERRAL ADVERTIS | SING OTHER | |
| POSITION(S) | APPLYING FOR: | | | | | |
| 1 | | RA | ΓΕ OF PAY EXPEC | TED \$ | | |
| 2 | | RA | ΓΕ OF PAY EXPEC | TED \$ | | |
| DO YOU WAN | T: FULL-TIME | P. | ART-TIME | | | |
| SPECIFY DAY | S AND HOURS YOU | ARE AVAILABLE T | O WORK: | | | |
| MONDAY | TUESDAY _ | WED | NESDAY | THURSDAY _ | | |
| FRIDAY | SATURDAY _ | SUNI | DAY | | | |
| DO NOT WRITE E | BELOW THIS LINE | | | CTART RATE | | |
| INTERVIEWED BY | | FILE NUMBER | FILE NUMBER | | _ STAKT DATE | |

LIST PRESENT EMPLOYER OR MOST RECENT EMPLOYER FIRST (PLEASE PRINT PLAINLY)

| COMPANY NAME | ANY NAME SUPERVISOR | | | | | |
|---|--|--|--|--|--|--|
| ADDRESS | DATES EMPLOYED: From | To | | | | |
| TELEPHONE | ELEPHONE | | | | | |
| STATE JOB TITLE AND DESCRI | BE YOUR WORK | | | | | |
| REASON FOR LEAVING | | | | | | |
| COMPANY NAME | SUPERVISOR | | | | | |
| ADDRESS | DATES EMPLOYED: From RATE OF PAY: START | To | | | | |
| TELEPHONE | RATE OF PAY: START | LAST | | | | |
| STATE JOB TITLE AND DESCRI | BE YOUR WORK | | | | | |
| REASON FOR LEAVING | | | | | | |
| COMPANY NAME | SUPERVISOR | | | | | |
| ADDRESS | DATES EMPLOYED: From | To | | | | |
| TELEPHONE | RATE OF PAY: START | LAST | | | | |
| | BE YOUR WORK | | | | | |
| | | | | | | |
| Occasionally the form of an app | s will not necessarily disqualify an applicant from e | to adequately summarize their | | | | |
| I certify that the information contained that the falsification of this information this application for employment as not be terminated, with or without notice. | PORTANT: READ CAREFULLY ed in this application is correct to the best of my known may result in my dismissal. I authorize the investigatecessary in arriving at an employment decision. I under, by the Company for any reason, including lack of son which, in the sole judgment of the Company, con | ation of all statements contained in derstand that my employment may work, unsatisfactory performance, | | | | |
| | Applicant's Signature | | | | | |

Date