## APPLICATION FOR EMPLOYMENT



We are an equal opportunity employer, dedicated to non-discrimination in employment based on race, color, age, religion, sex, national origin, handicap, disability or marital status.

This application will be valid for thirty days. The placing of any extraneous writings on this application will automatically disqualify the applicant for job consideration. Please answer only the questions listed herein.

Date:		Social Security N	No.:			
Name:			Are you 21 Years or Older?	∐Yes	□No	
Last	First	Middle				
Present Address:						
S	Street	City	State			
Phone No.:()		Referre	ed by:			
f related to anyone who v State Name, Department						
EMPLOYMENT DE	SIRED					
Position:		te You n Start:	Salary Desired: _			
Are you Employed Now?	∐Yes ∐No Ma	y we inquire of your pr	esent employer:	Yes 🔲	No	
Ever worked at this Comp	oany before?	No Where?	?	When?		
Are there any days, shifts	or hours you will not w	ork?				
f yes, please explain:						
EDUCATION	Name and Location of School	Degree/Certifica	ate Subjects	Studied	Grade	e Average
High School:						
College:						
Other (including graduate school):						
graduate scribbij.						
DEFEDENCES: C	ive below the names of	three persons not role	tod to you whom y	ou hovo kn	we at least a	one veer
REFERENCES: G		three persons not rela			own at least o	Years
Name	Address		Busines	3		Acquainted

**PREVIOUS EMPLOYMENT:** List below sequentially all of your employers in the last ten (10) years beginning with your current or most recent employer (use additional pages, if necessary)

Date Month and Year	Name, Address and Telephone # of Employer	Position and Job Duties	Salary	Reason for Leaving
From:				
To:				
From:				
То:				
From:				
То:				
From:				
То:				
	icted of, or pled guilty, no contest blace, offense(s), disposition, etc.)		me?	)
Did you work for any of the	ese employers under a different n	name: Yes No		
If yes, which employer(s)	and under what name(s?			
Please explain any gaps i	n your employment history:			
Have you received any wr	itten reprimands or disciplinary su	uspension during any previo	ous employment? [	∐Yes ∐No
If yes, please explain:				
Have you ever been disch	arged or asked to resign?	es No		
If ves please explain (incl	ude by whom, when and for what			

## **EMPLOYMENT APPLICATION CERTIFICATION**

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize Quik-E Food Stores or independent contractor to investigate all statements contained in this application, to interview the references and previous employers listed in this application, and to obtain a report from a consumer reporting agency to be used for employment purposes in accordance with the Fair Credit Reporting Act. I authorize the references and previous employers listed to give the Company all facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to the Company, including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or Quik-E's medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day probationary period. I further understand that my employment and compensation can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my probationary period, at the option of either Quik-E Food Stores or myself. I understand that no supervisor or other representative of Quik-E Food Stores other than the President has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of employment or my continued employment, that I may be requested by the Company to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

I certify that I have read, understand

and agree with the above.

Date	Signature of Applicant
<u>(</u>	Criminal Background Check Fee
that a basic criminal background check fee	essary for all employees to have a clean criminal record. Please be advised of \$15.00 will be deducted from you first paycheck. If you have any type of nor, or felony charges, now is the time to discuss this information with the
I,, criminal background check. I agree to have expense of my background check.	understand and agree to allow Quik-E Food Stores to conduct a police e the necessary fee deducted from my first paycheck in order to cover the
Signed	
Data	
Date	