

QUALITY FOODS/IGA

EMPLOYMENT APPLICATION

APPLICANT INFORMATION							
Last Name			First		M.I.	Date	
Street Address					Apartment/Unit #		
City			State		ZIP		
Phone			E-mail Address				
Date Available		Social Security No.			Desired Salary		
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for Quality Foods?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?			
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain			
Are you 18 years of age or older?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, state date of birth			
EDUCATION							
High School			Address				
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
College			Address				
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
Other			Address				
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree	
EMPLOYMENT INTERESTS							
Position Desired			Date you can start				
Full Time			Part Time			Shift Preference	
DAYS AND TIME AVAILABLE							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
FROM							
TO							

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
REFERENCES			
<i>Please list two professional references.</i>			
Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			
MILITARY SERVICE			
Branch		From	To
Rank at Discharge		Type of Discharge	
If other than honorable, explain			
DISCLAIMER AND SIGNATURE			
I certify that my answers are true and complete to the best of my knowledge.			
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.			
I understand that this employment application and any other company documents, including employee handbooks, are not intended to create and do not create, an employment contract between the company and me. The Company and its employees have an employment relationship which is known as employment at will. This means an employee is not required to work for the Company for any set period of time. An employee may voluntarily leave upon proper notice. The Company is also not required to employ an employee for any set period of time. An employee may be terminated by the Company at any time.			
I acknowledge the Company's notification to me, as required by the Fair credit Reporting Act of 1970, that an investigative inquiry may be made about me, including inquiries from the above references and from others concerning my credit history. I release the Company from any and all liability by reason of obtaining such information. I further understand, upon my written request that information as to any credit report shall be provided to me.			
If I am employed by the Company, I agree to keep confidential any and all proprietary or otherwise confidential information relating to the Company's business. I agree to comply with the Company's Policy, Ethics and Conduct statements.			
Signature			Date