DIAMOND SUPER MARKET

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFOR	MATION					DATE	
NAME				SOCIA	AL S	ECURITY NO.	
LAST	FIRST	MIDDLE					
PRESENT ADDRESS							
	STREET		CITY		STA	TE	ZIP CODE
PERMANENT ADDRE							
	STREET		CITY		STA	TE	ZIP CODE
PHONE NO.		A	RE YO	U 18 YEAR	S O	R OLDER Yes	□ No. □
Are you legally authodocumentation will be requ		k in the Unit	ed Sta	tes? Yes	<u> </u>	No [(If hire	d, work authorization
EMPLOYMENT DE	SIRED						
POSITION			DATE	E YOU START		SALA DESI	
100111011_							KED
ARE YOU EMPLOYED	NOW?		IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?				
THE TOO EMILECTED	, 110 11 .		01 10	<u>Jen ind</u>	2111	EMI EOTEK.	
EDUCATION		ND LOCATION SCHOOL	1	NO. OF YEARS ATTENDE	D	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL							
HIGH SCHOOL							
COLLEGE							
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL							
SUBJECTS OF SPECIA	L STUDY OR 1	RESEARCH W	ORK_				

MILITARY

Have you ever served	d in the military: Yes \[\sum No \[\]
Service Branch	Dates of Service
Rank	Discharge Status (e.g, honorable, less than honorable, etc.)
GENERAL	
Have you ever been	n fired or asked to resign from a job? Yes No If yes, please explain
Are there days or hou	urs you will be unable to work? Yes \(\subseteq No \subseteq \) If yes, what days or hours?
Have you worked un	der a different name? Yes ☐ No ☐ If so, please give name (for reference check).
	able to perform all of the tasks of the job for which you are applying, with or without nodation? Yes \square No \square
If not, explain	which tasks are you unable to perform
Have you filed any ty	ype of fraudulent claim against any of your present or past employers? Yes \(\subseteq No \subseteq \)
Will you abide by the	e safety rules of this company? Yes \(\subseteq No \(\subseteq \)
Have you ever been o	disciplined for violating company safety rules or regulations? Yes \(\subseteq No \(\subseteq \)
If yes, please	explain
Have you ever been o	disciplined for absence or tardiness at a job? Yes \(\subseteq No \subseteq \)
How many days of w	vork (or school) have you missed in the last two years?
How many times have	re you been late for work (or school) in the last two years?
Would you be willing Yes ☐ No ☐ If no, please explain	g and able to report to work on time every day on a regular and consistent basis?

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARING WITH LAST ONE FIRST).

DATE	NAME AND ADDRESS OF EARL OVER	CALADY	DOCUMION	REASON FOR	
MONTH AND YEAR FROM	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	LEAVING	
TO					
FROM					
TO FROM					
TO					
FROM					
TO					
SPECIAL SKILLS					
	Do you type? Yes \square No \square Words per minute				
Have you had any co	omputer or word processing experience of	r training? Ye	s 🗌 No 🗌		
What languages do y	ou speak fluently?				
and abilities which	Use this space below to describe why you are interested in working for our company and to list your skills and abilities which you feel particularly qualify you for a position with us. If you need more space, please continue on a separate sheet.				
REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.					
NAME	ADDRESS	В	USINESS	YEARS ACQUAINTED	
1					
2					
3					
CRIMINAL RECORD:					
	victed of a crime (excluding minor tra	ffic violation	s), including	driving under the	
If yes, please explain	1				

IN CASE OF
EMERGENCY NOTIFY

Name Address Phone No.

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE PERSONAL OR OTHERWISE AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE."

DATE	SIGNATURE			_
DO NOT WRITE BELOW THIS LINE				
INTERVIEWED BY				DATE
HIRED: Yes No	POSITION		DEPT	
SALARY/WAGE		DATE REF	PORTING TO WORK	
APPROVED: 1.	2.		3.	
Employ	yment Manager	Dept. Head	·	General Manager

CONSUMER AND CREDIT REPORT DISCLOSURE STATEMENT AND AUTHORIZATION

Under federal law, DIAMOND FOOD MARKETS, INC., may obtain consumer reports on any or all of its officers, employees, or applicants for employment, either at the time of application for employment or at any time during the period of employment with the Company, provided the consumer report is used for employment purposes.

A consumer report is a report relating to an individual's credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living, including but not limited to a credit report, an employment record check, a driver's record report, a criminal background investigation, and an investigation of any claim of wrongdoing, including but not limited to any claim of harassment or other violation of Company policy. The undersigned hereby acknowledges that he/she has received this Statement and Authorization and that he/she authorizes the Company to obtain such reports.

Name		Social Security #
Address	State	Zip
Signature		Date