



EMPLOYMENT APPLICATION

POSITIONS APPLIED FOR:

1)	2)	3)
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Today's Date	Social Security Number
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Last name	First Name	Middle
Address		City
State	Zip	Telephone #(home and cell)
Best time to contact you	E-mail Address	

Are you available to work weekends, holidays & overtime, as needed? Yes No

Please mark the shifts you are available to work: Day Evening/Swing Night/Grave Any

Preference: Full-time Part-time

Have you ever applied for a position with Eli's before? Yes No If yes, when: _____

Can you, after employment, submit verification of your legal right to work in the United States? Yes No

Have you used any other names or an alias? Yes No

If yes, please list other names or alias: _____

Have you, your spouse, or any relatives ever been employed or are currently employed by this Company? Yes No

If yes, please list names, dates and positions held: _____

EDUCATION

Name	City	# of years completed	Did you Graduate?	Received GED	Courses Studied
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Name	City	# of years completed	Did you Graduate?	Degree	Courses Studied
College or Other Schools			<input type="checkbox"/> Yes <input type="checkbox"/> No		Major Minor
			<input type="checkbox"/> Yes <input type="checkbox"/> No		Major Minor

EMPLOYMENT HISTORY

All applicants must provide employment history for a minimum of 10 years. Please begin with your most recent employer first.

Company Name		Title of Position(s)		Dates of Employment From (Month/Year): _____	
Address				To (Month/Year): _____	
City		State	Zip		
Phone Number		Immediate Supervisor/ Contact Person			
Reason for Leaving:			Are we able to contact this employer for employment verification and reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company Name		Title of Position(s)		Dates of Employment From (Month/Year): _____	
Address				To (Month/Year): _____	
City		State	Zip		
Phone Number		Immediate Supervisor/ Contact Person			
Reason for Leaving:			Are we able to contact this employer for employment verification and reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company Name		Title of Position(s)		Dates of Employment From (Month/Year): _____	
Address				To (Month/Year): _____	
City		State	Zip		
Phone Number		Immediate Supervisor/ Contact Person			
Reason for Leaving:			Are we able to contact this employer for employment verification and reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Company Name		Title of Position(s)		Dates of Employment From (Month/Year): _____	
Address				To (Month/Year): _____	
City		State	Zip		
Phone Number		Immediate Supervisor/ Contact Person			
Reason for Leaving:			Are we able to contact this employer for employment verification and reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Explain any gaps in employment not described above: _____

How were you referred to the Eli's? Newspaper Ad Employee Walk-in Job Fair
 Employment Service Other: _____

SKILLS

Please list any special skills, training, or certificates that are relevant to the position you are applying for: _____

Why do you think you'd make a good addition to our team at Eli's? _____

Do you speak any foreign languages? (*Only list if fluent*): _____

APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information.

I hereby agree to submit to any lawful drug or integrity testing that may be required as a condition of employment or continued employment and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge.

I understand that my employment is terminable-at-will, that I am not being employed for any specified time, and that this application is not and is not intended to be a contract for continued employment. I further understand that no representative of the Company 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 understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, of aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law.

Date: _____

Signature of Applicant: _____