

EMPLOYMENT APPLICATION										
PERSONAL INFORMATION (please print)										
Name Last	First	Middle	Date (N	M/D/Y)						
Are you less than 18 years of age? Yes No Other names you are known by (Foodstuffs is required to comply with federal, state, or provincial law.)								_		
Have you been convicted of a crime in the last seven (7) years? Yes No										
If yes, list convictions that are a matter of public record (arrests are not convictions). A conviction will not necessarily disqualify you for employment.										
Present Address	Street City State/Province Zip Code/Postal Code									
Permanent Address	Street City State/Province Zip Code/Postal Code									
Phone Number Daytime/Cell Evening Referred By										
EMPLOYMENT DESIRED (If you are applying for a retail hourly position, please keep in mind that the availability of hours may vary.)										
Position										
Specify hours available for 6	each day of the week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		
Are you able to work overtime? Have you ever worked for Foodstuffs? If yes, when? Which store/department?										
EDUCATION										
	Name and Location of School		Circle last		Did you Graduate?		Subjects Studied and Degrees Received			
High school			year complete		Yes	No	dilu Degrees nec	erveu		
College			1 2 3	4	Yes	No				
Post College			1 2 3	4	Yes	No				
Trade, Business or Correspondence School			1 2 3	4	Yes	No				
List skills relevant to the position applied for:										
Have you ever visited a Foodstuffs location? Where? Describe your experience										
What do you like about food?										
Why would you like to work for Foodstuffs?										
Describe a specific situation where you have provided excellent customer service in your most recent position. Why was this effective?										

FORMER EMPL	OYERS (List below current and last two employer	rs, starting with most red	cent one first.)						
Date: Month/Year	Current Employer (name, address, type of business)	Position		Reason for leaving					
From									
То									
Duties Performed									
Supervisor's Name Phone Number May we contact?									
Date: Month/Year	Previous Employer (name, address, type of business)	Position	Position Reason fo						
From									
То									
Duties Performed									
Supervisor's Name Phone Number May we contact?									
Are you capable of lifting 20 lbs.? If not, please explain.									
Are you able to stand on your feet for extended periods of time? If not, please explain									
Do you have any problems bending down? If so, please explain.									
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REFERENCES (Give below the name of two persons not related to you, whom you have known for at least one year.)									
Name	Address and Phone	Business	Position	Relationship					
I authorize persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and resume, if any) to provide any relevant information that may be required to arrive at an employment decision and I release all persons, schools, employers, of any and all claims for presentation or omission of facts may result in dismissal. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Foodstuffs to hire me. I acknowledge that employment with Foodstuffs is "At-Will" and the company retains the absolute right to end my employment for any due reason with or without cause.									
Date: Signature:									