



# APPLICATION FOR EMPLOYMENT

**"An Equal Opportunity Employer"**  
 CONVENIENT FOOD MART DOES NOT DISCRIMINATE ON THE BASIS OF RACE, CREED, COLOR, RELIGION, SEX, NATIONAL ORIGIN, HANDICAP, ANCESTRY OR AGE.

*"We promote a drug-free workplace."*

(PLEASE PRINT PLAINLY)

To Applicant: We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work-history will aid us in placing you in the position that best meets your qualifications *and* may assist us in possible future upgrading.

## PERSONAL

Date \_\_\_\_\_

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last First Middle

Present address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
No. Street City State Zip

Are you legally eligible for employment in the U.S.A.? \_\_\_\_\_ State age if under 18 or over 70. \_\_\_\_\_

Position(s) applied for \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per week

Would you work Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Specify days and hours if part-time \_\_\_\_\_

Were you previously employed by? \_\_\_\_\_ If yes, when? \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_ 20 \_\_\_\_\_

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our organization? \_\_\_\_\_

---

---

---

---

---

---

---

---

## RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Check Last Year Completed				Did You Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	List Diploma or Degree
			5	6	7	8		
Elementary		X	5	6	7	8	<input type="checkbox"/> Yes <input type="checkbox"/> No	X
High			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Other (Specify)			1	2	3	4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**List below all present and past employment, beginning with your most recent**

Name and Address of Company and Type of Business	From		To		Describe the work you did	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone									

Name and Address of Company and Type of Business	From		To		Describe the work you did	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone									

Name and Address of Company and Type of Business	From		To		Describe the work you did	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					
Telephone									

May we contact the employers listed above? \_\_\_\_\_ If not, indicate by No. which one(s) you do not wish us to contact \_\_\_\_\_

**PERSONAL REFERENCES** (Not Former Employers or Relatives)

Name and Occupation	Address	Phone Number

**MISCELLANEOUS INFORMATION**

Have you ever been convicted of a criminal offense other than a traffic violation?  Yes  No If yes give details: \_\_\_\_\_

A conviction record will not necessarily be a bar to employment, and factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

**PLEASE READ AND SIGN BELOW**

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal.

Application for employment must be renewed every 90 days if the applicant has not received a favorable reply.

\_\_\_\_\_  
Signature of Applicant