

NATURE'S PANTRY

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			
What is the maximum number of hours per week you would work?						
What is the minimum number of hours per week you would work?						
Are there days you cannot work?			Are you willing to work odd hours, early or late, if necessary?			
Times you are available:						
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 been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain		

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

REFERENCES

Please list three supervisor references from your last three jobs. We may ask you to arrange for us to arrange reference calls with these people before a job offer

Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		
Full Name		Relationship
Company		Phone ()
Address		

PREVIOUS EMPLOYMENT

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
What did you like most about this job?			
What did you like least?			
May we contact your previous supervisor for a reference? Please be aware that prior to a job offer, you may be required to arrange an interview with your former supervisor. YES <input type="checkbox"/> NO <input type="checkbox"/>			
How do you feel your former supervisor would rate your performance?			

Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
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Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
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How do you feel your former supervisor would rate your performance?			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	

SKILLS AND EXPERIENCE

Check any area where you have skills or experience and describe where and when you acquired them.

<input type="checkbox"/>	Cashiering/ Bagging
<input type="checkbox"/>	Stocking/ Receiving
<input type="checkbox"/>	Health & Bodycare
<input type="checkbox"/>	Herbs & Vitamins
<input type="checkbox"/>	Environmental Products
<input type="checkbox"/>	Natural Foods
<input type="checkbox"/>	Computer Skills
<input type="checkbox"/>	Maintenance
<input type="checkbox"/>	Customer Service
<input type="checkbox"/>	Sales

Are there other skills or experience you feel would especially qualify you to work at Nature's Pantry?

Which of your past jobs did you like the best?

Why?

Are there any past jobs that you really did not like?

Why?

Have you been given a job description or had the requirements of the job explained to you?

Do you understand these requirements?

Can you perform these requirements of this job with or without reasonable accommodations?

Do you have any defects in hearing? _____ In vision? _____ In speech? _____

Have you ever received Worker's Compensation or Disability Income payments? _____
If yes, describe

In case of emergency contact:

Nature's Pantry does not employ tobacco users, I certify I do not use tobacco products.

Signature _____ Date _____

Incomplete applications will not be considered for employment. Please print clearly.

Please feel free to attach a resume or any additional information.

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.

Signature _____ Date _____

