



TODAY'S DATE: \_\_\_\_\_

## HORROCKS FARM MARKET INC

### APPLICATION FOR EMPLOYMENT

(IN ORDER FOR HORROCKS TO CONSIDER YOUR APPLICATION, YOU MUST ANSWER ALL QUESTIONS COMPLETELY.  
EXCEPT THE OPTIONAL SECTION).

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

CURRENT ADDRESS: \_\_\_\_\_  
(NUMBER/STREET)

\_\_\_\_\_ (CITY) (ZIP CODE)

HOME PHONE: \_\_\_\_\_ CELL PHONE \_\_\_\_\_

HOW MANY YEARS HAVE YOU LIVED IN THIS CITY? \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES \_\_\_\_\_ IF NOT, WHEN? \_\_\_\_\_

JOB(S) APPLIED FOR: \_\_\_\_\_ RATE OF PAY EXPECTED : \$ \_\_\_\_\_ PER \_\_\_\_\_

DO YOU WANT TO WORK? FULL TIME: \_\_\_\_\_ OR PART TIME; \_\_\_\_\_

IF APPLYING ONLY FOR PART-TIME, WHAT DAYS AND HOURS? \_\_\_\_\_

ARE YOU WILLING TO WORK WEEKENDS, HOLIDAYS, AND ROTATING SHIFTS? YES \_\_\_\_\_ NO \_\_\_\_\_

EXPLAIN ANY LIMITATIONS ON HOURS: \_\_\_\_\_  
\_\_\_\_\_

HAVE YOU WORKED FOR US BEFORE? NO \_\_\_\_\_ IF YES, WHEN \_\_\_\_\_

HAVE YOU EVER APPLIED FOR WORK WITH US BEFORE? NO \_\_\_\_\_ IF YES, WHEN \_\_\_\_\_

ANY FRIENDS OR RELATIVES WORKING FOR US: \_\_\_\_\_  
\_\_\_\_\_

DO YOU HAVE ANY SKILLS, QUALIFICATIONS OR EXPERIENCE WHICH YOU FEEL WOULD ESPECIALLY  
FIT YOU FOR WORK WITH US? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

IF HIRED, DOU YOU HAVE RELIABLE MEANS OF TRANSPORTATION TO GET TO WORK?  
\_\_\_\_\_ DRIVING, \_\_\_\_\_ WALKING, \_\_\_\_\_ BUS, \_\_\_\_\_ RIDE, OTHER: \_\_\_\_\_

IF HIRED, WHEN CAN YOU START? \_\_\_\_\_

ARMED FORCES SERVICE? YES \_\_\_\_\_ NO \_\_\_\_\_ DATES OF SERVICE: FROM \_\_\_\_\_ TO \_\_\_\_\_

BRANCH OF SERVICE \_\_\_\_\_ DUTIES \_\_\_\_\_

RANK AT TIME OF ENLISTMENT: \_\_\_\_\_

RANK AT TIME OF DISCHARGE: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, EXPLAIN WHEN , WHERE, AND THE NATURE OF ALL CRIMINAL CONVICTIONS:  
\_\_\_\_\_  
\_\_\_\_\_

ARE THERE ANY FELONY CHARGES PENDING AGAINST YOU NOW? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, DESCRIBE: \_\_\_\_\_



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### **EDUCATION**

(LIST EACH SCHOOL SEPARATELY)

SCHOOL	NUMBER OF YEARS ATTENDED	NAME OF SCHOOL	CITY AND STATE	COURSE OF STUDY	DID YOU GRADUATE	LIST DIPLOMA OR DEGREE
GRADE					YES ____ NO ____	
MIDDLE					YES ____ NO ____	
HIGH					YES ____ NO ____	
COLLEGE					YES ____ NO ____	
OTHER (SPECIFY)					YES ____ NO ____	

ANY OTHER TRAINING YOU HAVE HAD? \_\_\_\_\_

**COMPUTER SKILLS:**

MICROSOFT WINDOWS       POWERPOINT       GRAPHICS DESIGN  
 MICROSOFT OFFICE       ACCESS       DATABASES  
 EXCEL       WEB DESIGN       DATA ENTRY  
 WORD       OTHER: \_\_\_\_\_

LANGUAGES:  ENGLISH ( \_\_\_\_%)       ITALIAN       GERMAN       RUSSIAN  
 SPANISH ( \_\_\_\_%)       FRENCH       JAPANESE      OTHER \_\_\_\_\_

### **WORK EXPERIENCE**

(LIST MOST RECENT JOBS FIRST)

NAME AND ADDRESS OF COMPANY	DATES EMPLOYED FROM/TO	LIST YOUR DUTIES	FINAL PAY RATE	REASON FOR LEAVING

IF YOU WERE EMPLOYED DURING THE LAST 2 YEARS, HOW MANY DAYS WERE YOU ABSENT AND/OR LATE: \_\_\_\_\_

MENTION ANY SKILLS YOU CONSIDER WILL HELP YOU IN THE POSITION YOU ARE APPLYING FOR: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



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### REFERENCES

(NOT FORMERS EMPLOYERS OR RELATIVES)

NAME:	ADDRESS AND TELEPHONE NUMBER:	OCCUPATION:

HOW DID YOU HEAR FROM US:       NEWSPAPER                       FRIENDS  
     INTERNET                                       ADDS  
     WALKING                                       SHOPPER                       OTHER

### OPTIONAL INFORMATION

DATE OF BIRTH: \_\_\_\_\_

ETHNIC ORIGIN:

WHITE     BLACK     HISPANIC     AMERICAN INDIAN  
 ASIAN     OTHER

SEX:                       M                       F

MARITAL STATUS:                       SINGLE                       MARRIED  
     DIVORCED                       WIDOWED                      OTHER \_\_\_\_\_

KIDS: \_\_\_\_\_

SMOKER:                       YES                       NO

### MANDATORY QUICK TEST

HOW MANY INCHES IN A FOOT \_\_\_\_\_

HOW MANY OUNCES IN A POUND \_\_\_\_\_

A PINT IS \_\_\_\_\_(OUNCES)

A QUART IS ABOUT \_\_\_\_\_(POUNDS)

\$238.57	1,398.76	234	
-\$99.56	+ 811.19	X 78	<u>7500</u>
			250

WRITE THE MISSING NUMBER:

3, 6, 9, 12, 15, \_\_\_\_\_                      201, 302, 403, \_\_\_\_\_  
 2, 4, 9, 16, 25, \_\_\_\_\_                      1, 3, 5, 7, 11, 13, \_\_\_\_\_

DRAW THE MISSING SYMBOL

L..                      M...                      N....                      \_\_\_\_\_  
 7                      J                      L                      \_\_\_\_\_



**HORROCKS FARM MARKET INC**  
APPLICATION FOR EMPLOYMENT

**NOTICE TO ALL APPLICANTS**

BEFORE ANY APPLICANT CAN BEGIN WORK, THE PERSON MUST BE ABLE TO VERIFY, UNDER FEDERAL LAW, THAT HE OR SHE IS AUTHORIZED TO WORK IN THE UNITED STATES. ALL APPLICANTS OFFERED A POSITION WITH **HORROCKS** WILL HAVE TO DOCUMENT THEIR AUTHORIZATION TO WORK BEFORE THE HIRING PROCESS WILL BE COMPLETED.

ALL APPLICANTS ARE BEING NOTIFIED AT THIS TIME THAT, IF SELECTED FOR HIRE, IT WILL BE YOUR RESPONSIBILITY TO PROVIDE **HORROCKS** WITH DOCUMENTATION SHOWING YOUR RIGHT TO WORK. **HORROCKS** IS GIVING YOU THIS NOTICE, SO YOU MAY HAVE THOSE DOCUMENTS READY IF YOU SHOULD BE OFFERED A POSITION WITH **HORROCKS** THE DOCUMENT WILL BE REVIEWED BY THE PERSONNEL DEPARTMENT AT THE TIME A CONDITIONAL OFFER OF EMPLOYMENT IS MADE.

**NOTICE OF HANDICAPPER RIGHTS**

**HORROCKS** ACTIVELY ENCOURAGES APPLICATIONS BY QUALIFIED INDIVIDUALS WITH HANDICAPS, AND DOES NOT DISCRIMINATE IN ITS CONSIDERATION OF SUCH APPLICANTS. IF YOU BELIEVE THAT ANY ACCOMMODATION OF A HANDICAP WILL BE NECESSARY TO PERMIT YOU TO PERFORM THE DUTIES OF THE POSITION. MICHIGAN LAW REQUIRES THAT YOU NOTIFY **HORROCKS** WITHIN 182 DAYS AFTER YOU KNEW OR HAVE KNOWN THAT THE ACCOMMODATION WAS NEEDED.

**APPLICANT 'S CERTIFICATION AND AGREEMENT**

(PLEASE READ CAREFULLY)

**1**                    CERTIFICATION OF TRUTHFULNESS

I CERTIFY THAT ALL STATEMENTS ON THIS APPLICATION FOR EMPLOYMENT ARE MADE COMPLETELY, TRUTHFULLY AND WITHOUT EVASION, AND FURTHER UNDERSTAND AGREE THAT SUCH STATEMENTS MAY BE INVESTIGATED AND IF FOUND TO BE FALSE WILL BE SUFFICIENT REASON FOR NOT BEING EMPLOYED, OR MAY RESULT IN MY DISMISSAL.

**2**                    AUTHORIZATION FOR EMPLOYMENT INFORMATION

I AUTHORIZE THE REFERENCES I HAVE LISTED ABOVE, AND ANY PRIOR OR CURRENT EMPLOYER OF MINE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, INCLUDING ANY DISCIPLINARY INFORMATION, ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING INFORMATION TO YOU. ALSO I HEREBY WAIVE WRITTEN NOTICE TO ME THAT EMPLOYMENT INFORMATION IS GIVEN PROVIDED BY ANY PERSON OR ORGANIZATION.

**3**                    EMPLOYMENT AT WILL

IF HIRED, IN CONSIDERATION OF MY EMPLOYMENT I AGREE TO ABIDE BY THE RULES AND POLICIES OF **HORROCKS**. I FURTHER AGREE THAT SUCH EMPLOYMENT AND ALL COMPENSATION CAN BE TERMINATED WITH OUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT THE OPTION OF EITHER, **HORROCKS** OR MYSELF. I UNDERSTAND THAT NO AGENT OR REPRESENTATIVE OR **HORROCKS** HAS ANY AUTHORITY TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, EXCEPT BY A WRITTEN EMPLOYMENT CONTRACT SIGNED BY THE PRESIDENT OF **HORROCKS**.

DATE: \_\_\_\_\_

\_\_\_\_\_

APPLICANT'S SIGNATURE