

Last name		First	MI					Date of application
Present Street address				Type(s) of work desired				
City		State		ZIP		Home/Cell telephone		e-mail address
Permanent Street address				Work telephone				
City		State		ZIP		Total Hours Available and Days Available		
How Were You Referred?	(Circle one.)	A Advertisement	B Employment agency	C By an employee	If so, give name:	D Open house	E Walk-in	F Other

Please read carefully. Complete by printing in ink or typing.

An Equal Opportunity Employer

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, handicap, marital status, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Provide all information requested.

Incomplete applications (missing dates, names, phone numbers, etc.) may result in rejection of your application. Your application form will be maintained in our files for six months from the date of application. You may submit a new application at any time.

Employment Record

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business		Type or classification of job			
Street address		Phone number		Brief description of job duties			
City		State		ZIP code			
Supervisor's name		Phone number					
Base salary		Dates worked					
		From		To			
Reason for leaving							
Last or present company		Type of business		Type or classification of job			
Street address		Phone number		Brief description of job duties			
City		State		ZIP code			
Supervisor's name		Phone number					
Base salary		Dates worked					
		From		To			
Reason for leaving							
Last or present company		Type of business		Type or classification of job			
Street address		Phone number		Brief description of job duties			
City		State		ZIP code			
Supervisor's name		Phone number					

Application for Employment

Base salary	Dates worked From _____ To _____	
Reason for leaving		

Educational History

School name	Location (city, state)	Major course or subject	Dates attended		Graduated		Degree
			From	To	Yes	No	
High school							
Technical/trade (after high school)							
College (list all attended)							
Other education/training							

Work References

List two past supervisors and one person who is not related to you who have knowledge of your qualifications for the position for which you are applying.

Name	Title/relationship	Address (street, city, state, ZIP code)	Phone no. (include area code)	Occupation

May we contact your present employer? Yes
 No

Wage or salary required _____ Date available _____

List your current schedule, if applicable, including days and times of the week you are available. If applying for part-time employment, please indicate the total number of hours you are available during a workweek.

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Application for Employment

Date

Signature

For Bare Essentials Natural Market Use Only

Do Not Write Below This Line
