

# WARD'S SUPERMARKET, INC.

## Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Position applied for: \_\_\_\_\_

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Previous Employment with us? Yes / No

Where you referred to us? Yes / No If yes, who were your referred by \_\_\_\_\_

### Availability

Are you legally able to be employed in the USA? **Yes / No** Have you ever been convicted of a felony? **Yes / No**

What type of position are you seeking? Part Time / Full time Number of hours desired per week \_\_\_\_\_

Hours Available: Sunday Monday Tuesday Wednesday Thursday Friday Saturday

From							
To							

Do you have reliable transportation which will allow you to meet your employment requirements? \_\_\_\_\_

### Most Recent Employment

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Wage: \$ \_\_\_\_\_ per hr.

Worked: From \_\_\_\_\_ To \_\_\_\_\_ Supervisor: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Wage: \$ \_\_\_\_\_ per hr.

Worked: From \_\_\_\_\_ To \_\_\_\_\_ Supervisor: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Summary: \_\_\_\_\_

Company: \_\_\_\_\_ Position: \_\_\_\_\_ Wage: \$ \_\_\_\_\_ per hr.

Worked: From \_\_\_\_\_ To \_\_\_\_\_ Supervisor: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Address: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Summary: \_\_\_\_\_

## Educational/Skill/Qualification

High School: \_\_\_\_\_ College: \_\_\_\_\_

Technical Training or Other: \_\_\_\_\_

Graduated? Yes / No Degree Earned? \_\_\_\_\_

Currently Enrolled? Yes / No (# of Hrs. \_\_\_\_\_) Planning to enroll? Yes / No

### Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

### References

Name: _____	Phone Number: (____) _____ - _____	Years Known: _____
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Name: _____	Phone Number: (____) _____ - _____	Years Known: _____
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Name: _____	Phone Number: (____) _____ - _____	Years Known: _____
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~ I hereby authorize Ward's Supermarket, Inc (hereinafter known as Ward's) to contact, obtain, and verify the accuracy of information contained in this Application from all previous employers, educational institutions, and references. This may also include the ordering of a Criminal Background Check. I also hereby release from liability Ward's and its representative for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

~ I understand that any misrepresentation or material omission made by me on this Application will be sufficient cause for cancellation of this Application or immediate termination of employment if I am employed, whenever it may be discovered.

~ If I am employed, I acknowledge that there is no specified length of employment and that this Application does not constitute an agreement or contract for employment. Accordingly, either I or Ward's can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law. If employed, I agree to fully comply with all policies, procedure, rules & guidelines of Ward's.

~ I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

~ I understand that if offered a position with Ward's, I will be required to submit to a Drug Screening Test to detect the presence of any controlled substance prior to being hired.

~ I understand that Ward's may obtain a Motor Vehicle Record Report for the purpose of screening potential employees, or for making promotion, demotion or discharge decisions regarding existing employees, based on the contents of that Report. I hereby give permission for Ward's to obtain initial & periodic Motor Vehicle Record Reports, as Ward's Deems necessary.

~ I acknowledge that the first ninety (90) days of employment is an Introductory (Probationary) Period.

~ I REPRESENT AND WARRANT THAT I HAVE READ AND FULLY UNDERSTAND THE FOREGOING AND THAT I SEEK EMPLOYMENT UNDER THESE CONDITION.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_