

Application For Employment

lisability or handicap, marital status, national origin, veteran status or arrest/conviction record. PERSONAL INFORMATION														Date of Application				
Complete Name	(Last) (First) (Middle)										Social Security Number							
Street Address		City State										Zip Code						
Any other name(s) ur	nder whic	ch you h	ave beer	previou	sly empl	oyed or u	under w	hich	schoo	ol record	is would	be local	ed.	Phone No	ımber		-	
Position(s) Applied F	pplied For												\dashv	Starting Wage Desired				
How did you learn ab	_	oyment A	Agency 1	□ Walk	:-in 🗖	Other					Names	of friend	ds or re	elatives en	nployed b	y this c	ompar	
If you are under 18 years of age, can you furnish a work permit?												☐ Yes ☐ ñ						
Have you ever filed a	n applica	tion with	us befo	re? If y	es, give	date										Yes		
iave you ever been e	n employed with us before? If yes, give date \ Yes _ N																	
	rom lawfully becoming employed in this country because of visa or (Proof of citizenship or immigration status will be required upon employment.)																	
o you have any restr	ictions o	r obligat	ions that	would p	revent y	ou from	working	ove	time?							Yes		
o you have any rest	ictions o	r obligati	ions that	would p	revent y	ou from	working	con	sisten	tly or ar	riving to	work on	time?			Yes		
Vhat date would you	be availa	ble to w	ork?			Availab	le to wor	rk: [] F/Ţ	□ Р/Т	☐ 1st	Shift C	2nd	Shift 🔲	3rd Shift	□те	mpora	
Can you travel if the jo f yes, are there limita					•											Yes		
lave you been convictives, please list date					ot neces	sarily di	squalify	an a	pplica	ant from	employr	nent.)				Yes		
lave you ever had an f yes, please describe		ated train	ilng in th	e United	States	military?			-							Yes		
DUCATION	ELEMENTARY SCHOOL					HIGH SCHOOL UND					ERGRADUATE COLLEGE / UNIVERSITY				GRADUATE / PROFESSIONAL			
School Name and Location																		
ears Complete	5	6	7	8	9	10	11		12	1	2	3	4	1	2	3	1	
)iploma /)egree						•		.••	,									
escribe Course f Study	_				,													
escribe any specializonsidering your applicated status.	ed traini cation.	ng, appr /ou may	enticesh exclude	ip, skills membe	, qualific rships w	ations, h	nonors d	or ext al se	ra-cu x, rac	rricular e, religio	activities on, natior	which y al origir	ou fee , age,	may be h	elpful to u	rs in or othe	r	

EMPLOYMENT EXPERIENCE - Start with your present or last job, including a related military service assignments and volunteer activities. You may exclude voluntary work which indicates race, color, religion, gender, national origin, hand up or other projected status. Please account for all time for at least DATES OF NAME, ADDRESS & TELEPHONE **DESCRIPTION OF WORK EMPLOYMENT** SALARY NUMBER OF EMPLOYER **REASON FOR LEAVING** (MONTH AND YEAR) PERFORMED From Starting: To Final: Job Title / Position: Supervisor: May we contact this employer? ☐ Yes ☐ No **DATES OF** NAME, ADDRESS & TELEPHONE **DESCRIPTION OF WORK EMPLOYMENT** SALARY NUMBER OF EMPLOYER **REASON FOR LEAVING PERFORMED** (MONTH AND YEAR) From Starting: To Final: Job Title / Position: Supervisor: May we contact this employer? ☐ Yes ☐ No **DATES OF** NAME, ADDRESS & TELEPHONE **DESCRIPTION OF WORK EMPLOYMENT** · SALARY REASON FOR LEAVING NUMBER OF EMPLOYER **PERFORMED** (MONTH AND YEAR) From Starting: To Final: Job Title / Position: Supervisor: May we contact this employer? ☐ Yes ☐ No **DATES OF** NAME, ADDRESS & TELEPHONE **DESCRIPTION OF WORK EMPLOYMENT** SALARY **REASON FOR LEAVING** NUMBER OF EMPLOYER **PERFORMED** (MONTH AND YEAR) From Starting: To Final: Job Title / Position: Supervisor: May we contact this employer? ☐ Yes ☐ No REFERENCES - Give name, address and telephone number of three references who are qualified to evaluate your capabilities and who are not related to you and are not previous employers. 1. 2. 3. APPLICANT'S STATEMENT I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in withdrawal of an offer of employment, or if subsequent to employment, may result in dismissal. I understand this employment application is not to be construed as a guarantee of employment. I further understand that, should I become employed, my employment with the organization does not constitute any form of contract, implied or expressed, and such employment may be terminated at will either by myself or my employer upon notice of one party to the other. My continued employment would be dependent on satisfactory performance and the continued need for my services as determined by the organization, I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. You may use this authority to check references with former employers I have listed, unless otherwise indicated, as well as the personal references listed. Signature of Applicant Date



Gianelli Sausage G & L Davis Meat Co.

Phone (315) 471-9164 Fax (315) 471-4474

SUPPLEMENT APPLICATION

What do you feel you can offer this company?	
Why would you like to work here?	
Do you have any physical limitations (i.e. lifting restrictions)? Yes	No
Do you have a valid drivers license? Yes No What class?	