APPLICATION FOR EMPLOYMENT

Are you als years of age or older: Are you eligible to work in the United States: Do you have a High School Diploma or equivalent? City: State: Zipcode: Permanent Address: City: State: Zipcode: City: State: Zipcode: Cell Phone: Discount of a criminal offense (felony or misdemeanor)? If yes, please State the nature of the offense(s), when and where convicted, and the disposition of the care (No employment will be denied solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, and the surrounding circumstances and relevance of the offense to the position(s) applying for: Are you currently employed? Position(s) applying for: Are you currently employed? Position(s) applying for: Desired Hours per week? Desired starting wage: Referred by: Desired starting wage: Referred by: Are you able to deliver? Availability: Please list the earliest time you are available to start a full shift each day (attach class schedule if in school) Monday Tuesday Wednesday Thursday Friday Saturday Sunday Sunday AM PM Please list any weekly commitments (weekly meetings, practices, etc.) or obligations: DisCLAIMER - At least ONE weekend (Thurs-Sat) close shift availability is required of all employees. Education Where Years Attended Graduate? Field Studie High School College Technical/Military Please list any special skills or certifications:	First N	ame:		Last Name	Last Name:			Middle Initial:			
Present Address: City: State: Zipcode: Permanent Address: City: State: Zipcode: City State: Zipcode: Zipcode: City State: Zipcode: Zipcode	-	-	•	•	•						
Permanent Address: City: State: Zipcode: Cell Phone: (Do you	ı have a High S	School Diploma	or equivalent?_							
Email Address:											
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Desired starting wage:	ositio	n(s) applying f	for:		Are y	ou curr	ently e	mployed?_			
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High School College Technical/Military						-	-				
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Technical/Military	High	School									
	Colle	ge									
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Employment History		
Previous employer:		Title:
		Ending Wage:
- -		
Reason for leaving:		
Previous employer:		Title:
Dates of employment: From-	То-	Ending Wage:
Job duties:		
Previous employer		Title:
		Ending Wage:
		Ending Wago
<u>References</u>		
	Dalationahin	Contact
		Contact: Contact:
		Contact:
accommodation? Yes/No If any, what reasonable accommodations	ations would you require?	
•		I and accurate. I understand that providing y application, or if employment commences,
employment and education. I autho communicate information regarding	rize my former employers and on my previous employment, atte	ucational organizations regarding my educational organizations to fully and freely endance, and grades. I authorize those information regarding my previous
employment signed on behalf of the The relationship be entirely volunta employment relationship at any time complete discretion to end the emp Similarly, my employer will have the	e organization by its Owner, the ary in nature, and either I or my be and without cause. With app bloyment relationship when I ch e right. Moreover, no agent, rep	s I am offered a specific written contract of e employment relationship will be "at-will." employer will be able to terminate the ropriate notice, I will have the full and oose and for reasons of my choice. bresentative, or employee of Estelas Fresh in behalf of the organization by its Owner,

SIGNATURE: DATE:_______

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO IT'S TERMS.

had the power to alter or vary the voluntary nature of the employment relationship.