

# COUNTRY FAIR

## Employment Application

Applications are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or in the presence of a non-related medical condition or handicap.

| APPLICANT INFORMATION  |  |  |  |
|--|--|--|--|
| Last Name  | First  | M.I.   | Date   |
| Street Address   |  | Apartment/Unit #                               |  |
| City   | State  | ZIP  |  |
| Home Phone   | Cell Phone   | Start Date?                                    |  |
| Times/Days Available   |  |  |  |
| Position Applied for   |  | F/T <input type="checkbox"/>                   | P/T <input type="checkbox"/>                             |
| Are you a citizen of the United States?  | YES <input type="checkbox"/> NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? | YES <input type="checkbox"/> NO <input type="checkbox"/> |
| Have you ever applied here before?   | YES <input type="checkbox"/> NO <input type="checkbox"/> | If so, when?                                   |  |
| Do you participate in any summer activities that interfere with the summer schedule? | YES <input type="checkbox"/> NO <input type="checkbox"/> | When will they begin/end?                      |  |
| How will you get to and from work?   |  |  |  |
| Will you be attending college?   | YES <input type="checkbox"/> NO <input type="checkbox"/> | What College? When?                            |  |
| Will you be commuting?   | YES <input type="checkbox"/> NO <input type="checkbox"/> |  |  |
| Emergency Contact Name   |  | Relationship                                   |  |
| Address  |  | Phone # ( )                                    |  |

| EDUCATION   |    |  |        |
|-------------|----|--|--------|
| High School |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| College     |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| Other       |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |

| MILITARY SERVICE (IF APPLICABLE) |                   |
|----------------------------------|-------------------|
| Branch                           | From To           |
| Rank at Discharge                | Type of Discharge |
| If other than honorable, explain |                   |
|                                  |                   |

**PREVIOUS EMPLOYMENT – START WITH YOUR PRESENT OR LAST JOB. EXCLUDE ORGANIZATIONAL NAMES WHICH INDICATE RACE, COLOR, RELIGION, SEX OR NATIONAL ORIGIN.**

|  |                    |                    |  |
|--|--------------------|--------------------|--|
| Company  |                    | Phone (    )       |  |
| Address  |                    | Supervisor         |  |
| Job Title  | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities   |                    |                    |  |
| From   | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| Company  |                    | Phone (    )       |  |
| Address  |                    | Supervisor         |  |
| Job Title  | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities   |                    |                    |  |
| From   | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |
| Company  |                    | Phone (    )       |  |
| Address  |                    | Supervisor         |  |
| Job Title  | Starting Salary \$ | Ending Salary \$   |  |
| Responsibilities   |                    |                    |  |
| From   | To                 | Reason for Leaving |  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                    |                    |  |

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date