Application for Employment HERITAGE NATURAL MARKET

Please Print 984 Laskin Road, Virginia Beach, VA 23451

Position(s) applied for_______________________________ Date of application____/____/____

Name_______________________________ Social Security #____-____-____

Address_______________________________

Telephone # (   )__________ Mobile/Beeper/Other # (   )__________ E-mail__________

Referral Source (How did you hear about us?) _______________________________

Have you ever been employed here before? If yes, give dates and positions __________ qYes qNo

Are you legally eligible for employment in this country?__________ qYes qNo

Date available for work ____/____/____ What is your desired salary range? __________

Type of employment desired ❑ Full-Time ❑ Part-Time ❑ Temporary ❑ Seasonal ❑ Educational

Employment History

Starting with your most recent employer, provide the following information:

Employer	Telephone #( )	Dates employed: Month / Year to Month / Year
Street Address City State		**Compensation (Starting)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Starting job title/final job title		
Immediate supervisor	May we contact for reference? ❑ Yes ❑ No ❑ Later	**Compensation (Final)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Why did you leave?		

Summarize the type of work performed and job responsibilities.

Employer	Telephone #( )	Dates employed: Month / Year to Month / Year
Street Address City State		**Compensation (Starting)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Starting job title/final job title		
Immediate supervisor	May we contact for reference? ❑ Yes ❑ No ❑ Later	**Compensation (Final)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Why did you leave?		

Summarize the type of work performed and job responsibilities.

Employer	Telephone #( )	Dates employed: Month / Year to Month / Year
Street Address City State		**Compensation (Starting)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Starting job title/final job title		
Immediate supervisor	May we contact for reference? ❑ Yes ❑ No ❑ Later	**Compensation (Final)** ❑ Hourly ❑ Salary $ per Commission/Bonus/Other Compensation $__________
Why did you leave?		

Summarize the type of work performed and job responsibilities.

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

- ❑ Word Processing_____ Years:_____
- ❑ Spreadsheet_____ Years:_____
- ❑ Presentation_____ Years:_____
- ❑ POS System_____ Years:_____
- ❑ E-mail_____ Years:_____
- ❑ Internet_____ Years:_____
- ❑ Other_____ Years:_____
- ❑ E-mail_____ Years:_____

Educational Background

Are you 18 or older? ❑ Yes ❑ No

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		❑ Diploma ❑ GED ❑ Degree_____ ❑ Certification_____ ❑ Other		
		❑ Diploma ❑ GED ❑ Degree_____ ❑ Certification_____ ❑ Other		
		❑ Diploma ❑ GED ❑ Degree_____ ❑ Certification_____ ❑ Other		

U.S. Military Service

Branch of Service_____ From_____ to _____

Rank and Type of Service _____ Training/Experience Received_____

References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors.
If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known

Applicant's Statement

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief operating officer of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand this application will be active for a period of one year; after that time, if I wish to be considered for employment, I must submit a new application.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all answers given by me are true, accurate and complete. I understand that the falsification, misrepresentative or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how it was discovered.

Your Signature:_____ Date:_____