



EMPLOYMENT APPLICATION

Application Date: _____

PERSONAL

Name (Last) _____ (First) _____ (Middle) _____			Telephone () _____
Present Address (Street) _____ (City) _____ (State) _____ (Zip Code) _____			
Rate of pay desired _____	Do you speak, read, and understand English? <input type="checkbox"/> Fluently <input type="checkbox"/> Average <input type="checkbox"/> Poorly	Have you applied to or worked at Farr's before? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No	If hired, can you present evidence of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If hired, will you be able to safely and effectively perform the duties of your job? <input type="checkbox"/> Yes <input type="checkbox"/> NO			

EDUCATION & TRAINING

High School	Complete address _____	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No	Year _____
College or University	Complete address _____	Major _____	Degree/Year _____
List any other education, training, special skills, language skills, or certificated/licenses that you possess related to this job _____			

REFERENCES

List three persons you have known for at least one year who are not relatives or former employers

Name	Address	Phone number	Years Acquainted

Work Experience

List the last three employers, beginning with the most recent employer.

Name of employer _____		Type of business _____	
Address (Street) _____ (City) _____ (Zip code) _____		Telephone _____	
Dates employed from: _____ to: _____	Starting position & title _____		Last position & title _____
Name & title of supervisor _____	May we contact? <input type="checkbox"/>	Ending salary _____	Reason for leaving _____
Name of employer _____		Type of business _____	
Address (Street) _____ (City) _____ (Zip code) _____		Telephone _____	
Dates employed from: _____ to: _____	Starting position & title _____		Last position & title _____
Name & title of supervisor _____	May we contact? <input type="checkbox"/>	Ending salary _____	Reason for leaving _____
Name of employer _____		Type of business _____	
Address (Street) _____ (City) _____ (Zip code) _____		Telephone _____	
Dates employed from: _____ to: _____	Starting position & title _____		Last position & title _____
Name & title of supervisor _____	May we contact? <input type="checkbox"/>	Ending salary _____	Reason for leaving _____

DRUG & ALCOHOL POLICY

Have you ever been convicted of a crime? _____ If so, state the nature of the crime(s), when and where incident(s) occurred, when and where convicted and disposition of case(s).

In the past two years have you been convicted of the crime of possession of marijuana for personal use? _____ If so, state when and where convicted and disposition of case(s).

Farr's has a vital interest in maintaining a safe environment for it's employees, customers and visitors. Therefore, Farr's prohibits the use of, purchase or sale of, transfer of, trafficking in, and working or reporting for work under the influence of intoxicants, drugs or controlled or illegal substances. Applicants for employment may be required to take and pass a drug and alcohol-screening test and must subject themselves to a background check before they may begin to work. Employees may be tested if Farr's has a reasonable suspicion of substance abuse. Results of such tests will be kept confidential in accordance with applicable law.

APPLICANT CERTIFICATION

I certify that I have not knowingly withheld or misrepresented any information required on the Employment Application of Farr's and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on this application or on any document used to secure employment shall be grounds of rejection of this application or for immediate discharge if I am employed, regardless of time elapsed before discovery.

I certify that I have read and understand the drug and alcohol policy of Farr's and agree to abide by it's terms.

I authorize Farr's to thoroughly investigate my referenced background including, but not limited to; work record, education, criminal history, and any other matters related to my stability for employment, and further, authorize my former employers to disclose to Farr's any and all letters, imports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Farr's, my former employers, and all persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to and does not create an employment contract between me and Farr's. In addition, I understand and agree that if I am employed, my employment is at will for no definite or determinable period and may be terminated at any time with Farr's, no promise or representation contrary to the forgoing is binding on Farr's unless made in writing and signed by me and a designated representative of Farr's.

AVAILABILITY (please note times)

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Day	_____	_____	_____	_____	_____	_____	_____
Afternoon	_____	_____	_____	_____	_____	_____	_____

AVAILABILITY (months available)

Jan	Feb	Mar	Apr	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
___	___	___	___	___	___	___	___	___	___	___	___	___

Store Use Only

Name _____	Hire Date _____
Current Address _____	Start Date _____
_____	Pay Rate _____
Phone _____	PT/FT _____
Cell _____	Permanetn/Temp _____
Work _____	Hired By _____
Email _____	References Checked _____
SS# _____	Date Sent to Payroll _____