



EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Date of Application: _____

LAST NAME _____

FIRST NAME _____ MIDDLE INITIAL _____

PHONE NO. _____ E-MAIL ADDRESS _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY NO. (Optional, however required upon hiring.) _____

Are you over the age of 18? YES NO

If hired, can you provide proof of eligibility to work in the United States prior to your start date? YES NO

What is your primary language? _____

EDUCATION

High School name and location: _____

Did you Graduate? YES NO G.E.D. No. of years attended _____

College name and location: _____

Did you Graduate? YES NO No. of years attended _____

Degree in: _____

DRUG TESTING NOTICE TO ALL APPLICANTS

This notice is to inform you that Seaside Market promotes a drug free work environment. If a job offer is extended to you, you will be required to submit to and pass a drug and/or alcohol test for the use of illegal substances prior to being hired.

AVAILABILITY

Date available for employment: _____

Position(s) desired: _____

Total hours available per week: _____ Total hours scheduled are at the discretion of management. Schedule and hours cannot be guaranteed.

When can you work? Initial _____

	MON	TUES	WED	THURS	FRI	SAT	SUN
Earliest Time							
Latest Time							

Are you seeking seasonal employment? YES NO

If yes, for how long? FROM _____ TO _____

Do you have any special time off already planned? YES NO If yes, when: _____

Do you have adequate transportation to get to work? YES NO

MISCELLANEOUS

Have you previously worked for Seaside? YES NO

If yes, dates: FROM _____ TO _____

Reason for leaving: _____

Position: _____ Immediate Supervisor: _____

Do you have family / relatives that work for Seaside Market? YES NO If yes, please state their name, relationship to you and where they work: _____

REFERRED BY _____

Are you able to perform all the essential functions (either with or without accommodation) of the job for which you are applying? YES NO

If hired, do you agree to abide by the safety rules of the company? YES NO

WORK HISTORY

Have you ever worked before? YES NO

Begin with your most recent employer and account for your last three jobs or for the last 7 years, whichever is shorter.

If you worked under a different name please indicate:

1 Employer's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone No. _____

Dates of Employment: (Month / Day / Year) FROM _____ TO _____

Full Time Immediate Supervisor

Part Time Supervisor

Position: _____

Reason for Leaving: _____

2 Employer's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone No. _____

Dates of Employment: (Month / Day / Year) FROM _____ TO _____

Full Time Immediate Supervisor

Part Time Supervisor

Position: _____

Reason for Leaving: _____

3 Employer's Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone No. _____

Dates of Employment: (Month / Day / Year) FROM _____ TO _____

Full Time Immediate Supervisor

Part Time Supervisor

Position: _____

Reason for Leaving: _____

Do we have your permission to contact your current employer?

YES NO If NO, please explain: _____

REFERENCES

Please do not use family members.

Name: _____

Phone No. _____ Years Known: _____

Name: _____

Phone No. _____ Years Known: _____

EMPLOYMENT TEST (No Calculators Please)

PART 1	.89		
	.79		
	3.39	10.00	35.25
	+ 2.79	- 4.59	- 33.08

PART 2

- Which do you consider more important as far as Seaside Market is concerned— courteous, prompt service, or quality products?
- You are working alone and your shift is due to be over at 6 P.M. The individual who is scheduled to begin working at 6 P.M. does not show up. What do you do?
- What do you consider to be the most important qualifications of a Seaside Market employee?

We are an equal employment opportunity company. Seaside Market complies with all applicable employment discrimination laws, including those that prohibit discrimination on the basis of age, race, color, national origin, sex (including pregnancy), religious beliefs, disability, sexual orientation, citizenship status, military status or any other basis protected by federal, state or local fair employment practice laws.

In consideration of my employment, I agree to conform to the rules and regulations of this company. My employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, at the option of either myself or the company.

All of the information on this application and made in conjunction with this application is correct and true to the best of my knowledge. I understand that any false or misleading statements made by me in connection with this application or the failure to disclose any material information will be grounds for immediate dismissal. Seaside Market may investigate the information provided on my application. I hereby release my previous employers and other persons from all claims and liabilities for furnishing information in connection with this investigation.

This application will remain active for a period of 90 days only. If you wish to be considered for employment after 90 days, you must submit another application.

Signed: _____

Date: _____