



# Confidential Application for Employment

Your interest in applying for employment is appreciated. We believe that every individual dealing with this Company should be treated fairly, equitably, and with dignity, without regard for race, color, religion, national origin, age, sex, veteran, handicapped or disabled status. Your qualifications will be reviewed with this policy in mind. If you have a handicap, or are disabled, as defined in federal laws against discrimination, we will determine if your handicap or disability enables you to perform in the employment you are seeking with reasonable accommodation.

Please complete in your own handwriting except when printing is requested. If additional space is needed for a complete answer, use remarks space on the back or attach sheets.

<b>Identification</b>		Last Name		First	Middle
Address Number & Street		City		State	Zip Code
Social Security No.		Telephone		Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	If you are not 18 years or older, please complete the following Birth Date                      Age
<b>Personal Data</b>	Who referred you to Seaver's Bakery		<input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Employment Security Commission	<input type="checkbox"/> Seaver's Bakery employee, who? _____ <input type="checkbox"/> Other, who? _____	
	Position applied				
Date available for employment	Would you be willing to work part-time? <input type="checkbox"/> Yes <input type="checkbox"/> No		We operate 7 days per week. Check times you are willing to work		<input type="checkbox"/> 1st shift <input type="checkbox"/> 3rd shift <input type="checkbox"/> Sunday <input type="checkbox"/> 2nd shift <input type="checkbox"/> Saturdays <input type="checkbox"/> Holiday
Have you ever worked in a bakery or manufacturing plant?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If so, where and when were you employed?	
Have you ever been convicted of a felony?		<input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, give date, place, charge and disposition (see C below).	

**Rules and certification** Applicants are not required to give any information prohibited by any applicable law or regulation.

A. All questions must be answered correctly and completely. I give Seaver's Bakery the right to investigate all information given to secure additional information if necessary.

B. I further understand that the completion of this application does not assure me of a position with this Company and does not obligate the Company to me in any way. I further understand that any misleading or incorrect statement or the incomplete filling out of either side of this application may render this application void and if employed would be cause for immediate discharge. I further understand that all new employees are on observation status for the first 30 days of their employment.

C. Information you provide concerning a felony conviction or unfavorable military discharge will not affect our employment decision unless for a valid business reason.

D. Seaver's Bakery is an "at will employer. Completion of this application or information in Company printed materials neither creates nor implies an employment contract.

E. Seaver's Bakery supports the Drug Free Workplace Act. Many shops are federal contractors and are required by Seaver's to perform pre-employment drug testing. All locations perform drug testing upon reasonable suspicion that you are under the influence of drugs at work.

Date \_\_\_\_\_ **Read, Understood and Agreed to:** \_\_\_\_\_  
Signature

<b>Education &amp; Skills</b>				
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High School	Location City/State	Dates Attended	Graduated?	Major Studies
College			Degree	
Vocation or Trade School				

**Other Formal Education**

U.S. Military Service	Date Entered	Discharged	Type Discharge (See Item C on front)	Reserve Status
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<b>Employment History</b>	List most recent employment first: account for all periods of time including military.
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May we contact the employers listed below?  Yes  No If no, indicate by number those to exclude.

Mo. Yr.	Mo. Yr.	Employer's Name and Address	Job Title and Duties	Supervisor's Name	Final Pay Rate	Reason for Leaving

<b>Personal References (3)</b>	
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Name	Address	Telephone

**Remarks** You may use this space for any additional comments, considerations, or information that may be useful in reviewing your application.

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