



510 RIDGE ROAD
P.O. BOX 81
WINDSOR, MAINE 04363
TEL. (207) 445-2511

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

NAME: _____
FIRST MIDDLE INITIAL LAST

ADDRESS _____

PHONE # _____ CELL # _____

ARE YOU A CITIZEN OF THE UNITED STATES YES NO IF NO ARE YOU AUTHORIZED TO WORK IN THE U.S.? YES NO

ARE YOU OVER 18? YES NO IF NO DATE OF BIRTH _____

HAVE YOU EVER BEEN CONVICTED OF OR PLEAD NO CONTEST TO A FELONY? YES NO

IF YES PLEASE EXPLAIN: _____

POSITION / AVAILABILITY

POSITION APPLIED FOR: _____

AS WE ARE A STORE THAT OPERATES NIGHTS AND WEEKENDS, IT IS IMPORTANT THAT WE CLEARLY UNDERSTAND WHAT DAYS AND TIMES DURING EACH DAY (OR NIGHT) THAT YOU ARE AVAILABLE TO WORK. FOR EACH DAY BELOW, WRITE IN THE HOURS OR TIMES THAT YOU ARE AVAILABLE. REMEMBER TO INDICATE THE ABSOLUTE EARLIEST TIME TO THE TIME THAT YOU CAN WORK EACH DAY. IF YOU ARE UNAVAILABLE ON A PARTICULAR DAY, WRITE IN "NOT AVAILABLE". IT IS IMPORTANT TO UNDERSTAND THAT WE WORK IN A RETAIL ENVIRONMENT WHERE MUCH OF OUR BUSINESS IS DONE DURING AFTERNOONS AND ON WEEKENDS.

MONDAY
TUESDAY
WEDNESDAY
THURSDAY
FRIDAY
SATURDAY
SUNDAY

FROM THE FOLLOWING LIST INDICATE THE POSITIONS IN WHICH YOU ARE INTERESTED:

_____ CASHIER
_____ STOCK CLERK
_____ BAKERY / DELI
_____ PRODUCE
_____ MEAT ROOM
_____ OTHER

WHAT IS THE MINIMUM NUMBER OF HOURS YOU CAN WORK? _____

WHAT IS THE MAXIMUM NUMBER OF HOURS YOU CAN WORK? _____

ARE YOU AVAILABLE TO BE CALLED IN? YES NO

WHAT DATE ARE YOU AVAILABLE TO START WORK? _____

EDUCATION

NAME / ADDRESS OF SCHOOL

DEGREE / DIPLOMA

GRADUATION DAT

SKILL AND QUALIFICATIONS: LICENSES, TRAINING, AWARDS. _____

EMPLOYMENT HISTORY

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 NO		

COMPANY	PHONE ()	
ADDRESS	SUPERVISOR	
JOB TITLE	STARTING SALARY \$	ENDING SALARY \$
RESPONSIBILITIES		
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MAY WE CONTACT YOUR PREVIOUS SUPERVISOR FOR A REFERENCE? YES NO		

COMPANY	PHONE ()	
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JOB TITLE	STARTING SALARY \$	ENDING SALARY \$
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FROM	TO	REASON FOR LEAVING
MAY WE CONTACT YOUR PREVIOUS SUPERVISOR FOR A REFERENCE? YES NO		

REFERENCES

PLEASE LIST THREE PROFESSIONAL REFERENCES

FULL NAME	RELATIONSHIP
COMPANY	PHONE ()
ADDRESS	
FULL NAME	RELATIONSHIP
COMPANY	PHONE ()
ADDRESS	
FULL NAME	RELATIONSHIP
COMPANY	PHONE ()
ADDRESS	

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my immediate release. I authorize the verification of any or all information listed above.

SIGNATURE _____

DATE _____