



Sendik's

SENDIK'S FINE FOODS, INC.
18985 W. Capitol Drive
Brookfield, WI 53045

APPLICATION FOR EMPLOYMENT



GENERAL INFORMATION

Please type or write in the appropriate sections. You must complete all sections of the application. Mark n/a if sections are not applicable to you. Incomplete applications will not be considered. We are an Equal Opportunity Employer.

Last Name	First	Middle	Date
Address			Home Phone
City, State, Zip			Cell Phone
Email Address			Social Security Number
Have you ever applied at this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year _____			Position Applied For
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No If under 18 years of age, please provide your date of birth _____			Salary Desired \$
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No Can you provide proof, upon request, that you are authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No			Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
How were you referred to Sendik's Fine Foods, Inc.? <input type="checkbox"/> Agency <input type="checkbox"/> Walk-in <input type="checkbox"/> School <input type="checkbox"/> Newspaper <input type="checkbox"/> Other			When will you be available to begin work?

Emergency contact:	_____	_____	_____
	Name	Relationship	Phone
Reference:	_____	_____	_____
	Name	Relationship	Phone
	_____	_____	_____
	Name	Relationship	Phone

AVAILABILITY

To help us consider you for a job that matches your availability, please indicate the earliest and latest time you can work each day.

DAY	MON.	TUES.	WED.	THUR.	FRI.	SAT.	SUN.
EARLIEST START TIME							
LATEST END TIME							

Indicate the maximum number of hours/days you can work per week: _____

Indicate the number of hours/days you would prefer to work each week: _____

EDUCATION

School	Name and Location (City, State)	Course of Study	No. of Years Completed	Diploma or Degree Received
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:
Other (specify)				<input type="checkbox"/> Yes <input type="checkbox"/> No Type:

SPECIAL TRAINING/SKILLS/QUALIFICATIONS

List any special training, skills, licenses and/or certificates relevant to the types of employment you are seeking at this company (i.e. meat cutting, floral design/arrangement, baking, customer service, management):

EXPERIENCE

In the space below, indicate the job in which you've had experience and the amount of time spent working in that area.

Shipping and Receiving

Cash Register/Retail Floor

Supervisory position? Yes No How many employees did you supervise?

General Office

EMPLOYMENT

List your current or most recent employer first and indicate a continuous record of employment for the last ten years or from the time you left school. Please add a supplementary sheet if additional space is required.

If you are currently employed, may we contact your employer about this application? Yes No

Employer	Phone
Address	Employed (Month and Year) From: _____ To: _____
Job title/duties	Starting rate \$ _____ per _____ Ending rate \$ _____ per _____
Supervisor	Reason for leaving

Employer	Phone
Address	Employed (Month and Year) From: _____ To: _____
Job title/duties	Starting rate \$ _____ per _____ Ending rate \$ _____ per _____
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Employer	Phone
Address	Employed (Month and Year) From: _____ To: _____
Job title/duties	Starting rate \$ _____ per _____ Ending rate \$ _____ per _____
Supervisor	Reason for leaving

Employer	Phone
Address	Employed (Month and Year) From: _____ To: _____
Job title/duties	Starting rate \$ _____ per _____ Ending rate \$ _____ per _____
Supervisor	Reason for leaving

Please explain here the gaps in your employment history

BACKGROUND INFORMATION

Have you ever been known by any other name(s) which this company will need to verify any of the information contained in this application? Yes No If yes, give name(s) and identify the related school, employer, etc.

Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? Yes No If yes, explain 1) nature of the crime, 2) date of conviction and 3) state in which convicted.

Do you have any pending criminal charges against you? Yes No If yes, describe 1) nature of charges, 2) date issued and 3) county and state where issued.

*Note: A criminal record or a pending criminal charge does not constitute an automatic bar to employment by the company and will be considered only as it relates to the job for which you are applying.

PLEASE READ CAREFULLY BEFORE SIGNING

Federal law requires the company to notify each applicant that we:

- Hire only United States citizens and aliens authorized to work in United States
- Will require all new employees to complete the designated employers verification form and present documentation to certify that you are eligible for employment as a United States citizen or alien authorized to work in the United States.

This application will be retained in our active files for sixty (60) days. If you wish to submit another application after this period of time, please feel free to do so.

I agree to abide by all the rules of the company and will obey the orders and the instructions of my supervisor. I will use and wear all safety appliances furnished me by the company and will be careful in my work, and not expose myself or other workers to unnecessary dangers.

I certify that this application was completed by me, and that all information contained in this application is true and complete to the best of my knowledge and belief. I understand and agree that any false information, misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.

I authorize Sendik’s Fine Foods, Inc. to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.

Regardless of whether or not I become employed by Sendik’s Fine Foods, Inc., I recognize that this application is not and should not be considered a contract of employment. I understand that employment at Sendik’s Fine Foods, Inc. is on an at will basis and that my employment may be terminated with or without cause, and without notice, at my option or the company’s unless specifically provided otherwise in a written employment contract

Signature of Applicant _____ Date _____

Thank you for your interest in Sendik’s Fine Foods, Inc.