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		Gen	eral				
				Date			
Name							
Las	st	First			Middle Initial		
Address							
	Number	Street					
	City		State	Zip			
Telephone	( )		Cell ( )				
Annual of 10 years or older? (Circle) VEC or NO			Di	ays / Hours available to	work		
Are you of 18 years or older? (Circle) YES or NO  Position applied for (1)			No Pref.	Thurs			
rosition applie			Mon	Thurs Fri			
and salary desired (2)				Sat			
, ,				Sun			
How many hou	urs can you	work weekly?					
Can you work	nights? (Cir	cle) YES or NO					
Full-Time Only	P	art-Time Only Full or Part-Time	Date av	ailable for work?			
Have you ever	applied for	employment with us? (Circle) YES or	NO				
How did you h	ear about t	he position?					
-		ve(s) currently working for Index Fresh? (C					
	-	parent, child, sibling, grandparent, aunt/	uncle, niece/nephew	, in-law, cousin, step re	lative, dependent, or		
domestic parti							
List relative(s)	-						
		Fduc	ation				
				Date			
Type of Sc	hool	Name of School & Loca	tion	Start / End	Major and Degree		
High School							
C-11							
College							
Business or Tra	ade						
School							
Professional So	chool						
Troressional St	ciiooi						
		Other Inf	ormation				
Have you ever	been convi	icted of a crime? (Circle) YES or NO					
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were							
committed, sentence(s) imposed, and type(s) of rehabilitation.							



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	Other in	nformation (continued)				
Do you have a License to Dri	ve? (Circle) YES or NO	0				
What is your means of trans	portation to work?					
State of issue	Class	Expiration date				
		? (Circle) YES or NO How many?				
Have you had any moving view	olations during the past thre	ee years? (Circle) YES or NO How many?				
		References				
Please list three references of	other than relatives or previ	ious employers.				
	I					
		Relationship				
Company		Phone ( )				
Name	Title	Relationship				
Company						
. ,		<del></del>				
Name	Title	Relationship				
Company		Phone ( )				
		Military Service				
Branch						
If other than honorable, exp	lain					
		Work Experience				
		Work Experience				
name. Attach additional she		peginning with your most recent job held. If you were self-employed, give firm				
Name of employer		Name of Supervisor				
-						
Phone Number ( )						
May we contact? (Circle)						
	, - <u></u>					
List the jobs hald disting	formed skills used and	and advancements or promotions resolved while very very deal of this a				
List the jobs held, duties performed, skills used or learned, advancements or promotions received while you worked at this company.						



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work Experience (continuea)							
Name of employer	Name of Supervisor						
Address	Employment Dates From	To					
City, State, Zip Code	Pay or Salary Start						
Phone Number ( )							
May we contact? (Circle) YES or NO							
Reason for leaving (be specific)							
List the jobs held, duties performed, skills	used or learned, advancements or promotions rece	ived while you worked at this company.					
Name of employer							
Address							
City, State, Zip Code		Final					
Phone Number ( )							
May we contact? (Circle) YES or NO							
Reason for leaving (be specific)							
List the jobs held, duties performed, skills	used or learned, advancements or promotions rece	ived while you worked at this company.					
	ifficult for an individual to adequately summarize a nation necessary to describe your full qualifications f						
Did you complete this application yourself	? (Circle) YES or NO						
If NO, who did?							



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#### **Complete Application**

The information provided in this Application for Employment is true, correct and complete. If employed, any misstatement or omission of fact on this application may result in your dismissal.

You understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ you in the future.

If Index Fresh decides to engage an investigative consumer reporting agency to report on your credit and personal history, you authorize Index Fresh to do so. If a report is obtained, Index Fresh must provide, at your request, the name and address of the agency so you may obtain from them the nature and substance of the information contained in the report.

Applicant / Employee Signature		
Print Name	 Date	



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# Job Applicant / Employee Notice, Acknowledgement, and Consent for Drug Testing Requirements

Index Fresh conducts testing to identify job applicants and current employees who may be abusing drugs. The Company's Drug-Free Workplace/Policy Against Alcohol Misuse and Controlled Substance Use will be provided to you upon hire or you may request a copy at any time.

You have the right to refuse to undergo testing. However, if you are a job applicant, the consequences of refusing to undergo testing, or refusing to cooperate in testing will result in the termination of the pre-employment selection process. All offers of employment are contingent upon your passing a drug screening test. An employee who fails or refuses to undergo testing, or refuses to cooperate in the testing process will be subject to disciplinary action up to and including termination of employment.

Your signature below indicates you allow the Company to collect urine specimens for drug testing. You also give consent for the release of the test results to appropriate management employees. Finally, this consent form shall be valid and effective throughout your employment.

You agree that a facsimile or photocopy of this form is valid just like the original form.

Applicant / Employee Signature

Print Name

Date