

# Application for Employment

## Franklin Foods, Inc (VT)/Franklin Foods West (AZ)

Email: [employment@franklinfoods.com](mailto:employment@franklinfoods.com)

**We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.**

(Please Print)

Position(s) Applied for:	Date of application:	
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Relative	<input type="checkbox"/> Inquiry
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Friend	<input type="checkbox"/> Other: _____

Last Name	First Name	Middle Initial
<b><i>PLEASE FILL IN YOUR ACTUAL MAILING ADDRESS SO WE CAN CONTACT YOU BY MAIL!</i></b>		
Address: <i>Number</i>	<i>Street</i>	<i>City</i>
	<i>State</i>	<i>Zip Code</i>
Telephone Number(s):	Email Address:	Social Security Number

Best Time to contact you at home is ..... :\_\_\_\_\_ PM AM

If you are under 18 years of age, can you provide required proof of your eligibility to work? ..... Yes No

Have you ever filled out an application with us before? ..... Yes No  
     If yes, give date: \_\_\_\_\_

Have you ever been employed with us before? ..... Yes No  
     If yes, give date: \_\_\_\_\_

Do any of your friends or relatives, other than spouse, work here? ..... Yes No

Are you currently employed?..... Yes No

May we contact your current employer? ..... Yes No

If hired, would you be able to present evidence that you can legally work in the United States?  
*Proof of citizenship or immigration status will be required upon employment* ..... Yes No

Date Available for work: \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary / hourly wage? \_\_\_\_\_

Are you available to work:      Full Time      (please indicate 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> shift)  
    Part Time      (Please indicate Mornings Afternoons Evenings)  
    Seasonal      (Please indicate dates available: \_\_\_\_/\_\_\_\_/\_\_\_\_ - \_\_\_\_/\_\_\_\_/\_\_\_\_)

Are you currently on "lay-off" status subject to recall? ..... Yes No

Can you travel if the job requires it? ..... Yes No

Have you been convicted of a felony within the last 5 years? ..... Yes No

**We are an Equal Opportunity Employer**

# Education:

	Name and Address of School	Course of Study	Years Completed	Diploma or Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

**Describe any specialized training, apprenticeship, skills and extra-curricular activities:**

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**Describe any job related training received in the United States Military:**

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**List Professional, Trade, Business, or civic Activities and Offices held:**

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

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# Employment Experience:

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude membership, which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

1.

Employer	Dates Employed		Work Performed (use lines below)
	From	To	
Address			
Telephone Number	Hourly Rate / Salary		
	Starting	Final	
Job Title	Supervisor		
Reason For Leaving			

2.

Employer	Dates Employed		Work Performed (use lines below)
	From	To	
Address			
Telephone Number	Hourly Rate / Salary		
	Starting	Final	
Job Title	Supervisor		
Reason For Leaving			

3.

Employer	Dates Employed		Work Performed (use lines below)
	From	To	
Address			
Telephone Number	Hourly Rate / Salary		
	Starting	Final	
Job Title	Supervisor		
Reason For Leaving			

