



Employee Application

Please type or print legibly. Mail, fax, or email completed form and resume to: Kristy Clark, COO, kristyc@hometownprovisions.net, 201 W. Kendig Rd, Willow Street, PA 17584, fax 717-464-4871.

Application for: <input type="checkbox"/> Warehouse <input type="checkbox"/> Driver <input type="checkbox"/> Receptionist <input type="checkbox"/> Buyer <input type="checkbox"/> Accounts Receivable <input type="checkbox"/> Sales				
Today's date _____ -Date of birth _____ -Social Security # _____				
Name as it appears on your driver's license _____				
Last	First	Middle	Maiden	
Current address _____				
Street	City	State	Zip	
Permanent address _____				
Street	City	State	Zip	
Email address _____				
Phone Nos. with area code: Home _____ Daytime _____ Cell _____				
Citizenship _____ If not US, are you a permanent resident of the US? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Are you currently authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No. (Proof of eligibility will be required upon arrival.)				

Education

TYPE OF SCHOOL	NAME OF SCHOOL	CITY & STATE	YEAR COMPLETED	MAJOR & DEGREE
High School				
Trade School				
College				

Professional Experience

Current or most recent employer first	Supervisor	Employment dates
	Name _____ Phone _____	From _____ To _____
Briefly describe your title, duties and reason for leaving: _____ _____ _____		

Employer	Supervisor	Employment dates
	Name _____ Phone _____	From _____ To _____
Briefly describe your title, duties and reason for leaving: _____ _____ _____		

Employer	Supervisor	Employment dates
	Name _____ Phone _____	From _____ To _____
Briefly describe your title, duties and reason for leaving: _____ _____ _____		

Criminal Record

<p>Have you ever been convicted of a crime, other than traffic violations? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, explain nature and location of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____ _____ _____</p>

Driving Record

<p>Driver's license number _____ State of issue _____ Expiration date _____</p> <p>Have you had any vehicle accidents during the past five years in which you were at fault? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, describe the causes, damages, and any injuries to yourself or others: _____ _____</p> <p>Have you had any moving violations (speeding tickets, etc.) during the past five years? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, describe the dates, nature and locations of the moving violations: _____ _____</p> <p>Have you ever been denied employment based on unsafe driving? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If so, describe the circumstances: _____ _____</p>
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Has your license ever been suspended? Yes No

If so, describe the circumstances:

References

List two professional references, people with whom you have worked, preferably present or former supervisors (No relatives).

Name _____

Name _____

Relationship _____

Relationship _____

Position _____

Position _____

Employer _____

Employer _____

Address _____

Address _____

Phone _____

Phone _____

Email _____

Email _____

Accommodation of Disabilities

A job description has been provided to you. Indicate if you are physically able to perform the essential functions of the job for which you have applied Yes No.

If you answered "No", please identify those job functions that you cannot perform. If a reasonable accommodation is required to enable you to perform the job properly and safely, please describe:

Consent Agreement and Release

In consideration of my prospective employment by Hometown Provisions, Inc. (hereinafter called "Hometown"):

I authorize investigation of all statements contained in this form, including my criminal record and driving record. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Hometown permission to contact my previous or current schools or employers, references, and others, and hereby release Hometown from any liability as a result of such contact. I understand that I may be required to be tested for illegal drugs.

Signature _____ Date: _____

Hometown Provisions, Inc. is an equal opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability.