



## APPLICATION INSTRUCTIONS

Thank you for your interest in working at our company. We appreciate your application and look forward to the possibility of your joining our team. This sheet is for your information. Please tear it off and keep it for reference.

Please complete the attached application and authorization for release of information forms. Please print or type in all information so it may be easily read. Be certain all forms are completely filled out and signed. Use the abbreviation "N/A" if a particular provision or section in the form is not applicable to you.

Should there be an appropriate opening, your application will be reviewed along with others. It is not necessary for you to contact this office regarding any job openings after you have completed your application. If you are among the most qualified applicants for a position, an interview will be arranged. Please notify us in writing if your address or telephone number should change.

Employment decisions are made solely on the basis of qualifications to perform the work for which you are applying. Qualifications include education, training, work experience and other factors which are relevant in determining job performance. Credentials and experience will be verified through schools, former employers and licensing/ certification agencies, if applicable. As an Equal Opportunity Employer, decisions to hire and promote are made without regard to race, color, creed, national origin, sex, pregnancy, physical or mental disability (unrelated to ability to do the job) or age (as defined by law).

Thank you again for your application!



## APPLICATION FOR EMPLOYMENT

\_\_\_\_\_ Date

### Personal Details

Name \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_  
Street City State Zip code

Permanent Address \_\_\_\_\_  
(if different from present address) Street City State Zip code

\_\_\_\_\_ Phone number

\_\_\_\_\_ Email address

Are you a US Citizen or otherwise authorized to work in the United States? \_\_\_ YES \_\_\_ NO

Are you 18 years of older? \_\_\_ YES \_\_\_ NO

Do you have your own reliable transportation? \_\_\_ YES \_\_\_ NO

\_\_\_\_\_ Referral source

**Employment Desired**

\_\_\_\_\_  
Position applying for

\_\_\_\_\_  
Date available

Are you currently employed?  YES  NO

Have you worked for Kitchen Pride Mushroom Farms previously?  YES  NO

If YES:

\_\_\_\_\_  
Reason for leaving

\_\_\_\_\_  
Dates of employment

**Education**

	Name and Location of School	# of Years Attended	Did you Graduate? (degree obtained)	Subject Studied
Grammar School				
High School				
College				
Trade school or other				

**Prior Employment History**

**Current or Last Employer**

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Company	Type of business
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Address	Phone
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Position and duties

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Supervisor

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Start date (MM/YY)	End date (MM/YY)
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Starting Salary	Ending Salary
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Reason for leaving

**Next Previous Employer**

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Company	Type of business
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Address	Phone
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Position and duties

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Supervisor

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Start date (MM/YY)	End date (MM/YY)
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Starting Salary	Ending Salary
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Reason for leaving

**Next Previous Employer**

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Company

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Type of business

---

Address

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Phone

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Position and duties

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Supervisor

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Start date (MM/YY)

---

End date (MM/YY)

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Starting Salary

---

Ending Salary

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Reason for leaving

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Have you ever been terminated from employment?

\_\_\_YES

\_\_\_NO

If YES, please provide details:

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I certify that all information given on this application is true, correct and complete to the best of my knowledge. I also certify that I have accounted for all of my work experience and training on this application, and that I have not knowingly withheld any fact or circumstance which would, if disclosed, affect my application unfavorably.

If employed by Kitchen Pride Mushroom Farms, Inc., I agree to abide by its rules and regulations. I that discovery or misrepresentation or omission of facts herein will make me ineligible or be cause for immediate dismissal. I authorize any inquiry to be made on any information contained in this application if I am considered for employment. I agree to furnish additional information as may be required to complete my employment file. I understand that operating conditions may require me to temporarily work other for the one for which I am applying, and I agree to such scheduling change as directed by my supervisor.

I understand that my employment will require certain physical capabilities relating to ability to lift and transport residents or objects, assist other employees in physical tasks and to stand on most of my shift, either on a regular basis or from time to time. I must be physically capable of performing these activities as to complete my duties. My employment also requires that I am alert at all times to potential safety hazards or dangerous situations. I am required to these potentially dangerous or hazardous conditions and to take appropriate steps to prevent any injury from occurring and if possible, I should correct the situation myself so as to render it safe. I also understand that my employment, both initial and continued, may be conditioned upon maintaining a favorable health evaluation. If requested, I agree to submit, at any time, to a physical examination performed by a qualified medical doctor of Kitchen Pride Mushroom Farms, Inc.'s choice and for which such exam shall be paid for by Kitchen Pride Mushroom Farms, Inc. I also agree that all information concerning said physical examination can be supplied Kitchen Pride Mushroom Farms, Inc., or an authorized agent of the company, upon their request.

I understand that this is an application for employment and that no employment contract, either expressed or implied, is being offered. I also understand that if employed, such employment is for an indefinite period and can be terminated at will by either party, with or without notice, at any time for any or no reason, and is subject to change in wages, conditions, benefits and operating policies. It is the policy of Kitchen Pride Mushroom Farms, Inc. that all new employees will be paid by deposit at a local bank at a local bank of their choice. Paydays will be on Fridays, but the direct deposit and funds will be available at the open of business Friday morning.

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Signature

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Date



## BACKGROUND INVESTIGATION CONSENT

I, \_\_\_\_\_ hereby authorize Kitchen Pride Mushroom Farms, Inc. and/or its-agents to make an independent investigation of my background, references, character, and past employment. Education, credit history, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment now and, if applicable, during the tenure of my employment with Kitchen Pride Mushroom Farms, Inc.

I release Kitchen Pride Mushroom Farms, Inc. and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regard to the information from any all of the above reference sources used.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge.

**Name** \_\_\_\_\_  
Last First Middle

**Present Address** \_\_\_\_\_  
Street City State Zip code

\_\_\_\_\_  
Dates of residence at this address (MM/YY – MM/YY)

**Previous Address** \_\_\_\_\_  
Street City State Zip code

\_\_\_\_\_  
Dates of residence at this address (MM/YY – MM/YY)

\_\_\_\_\_  
Date of birth (MM/DD/YYYY)

\_\_\_\_\_  
Driver's license / ID number

\_\_\_\_\_  
Social security number

\_\_\_\_\_  
State of license / ID

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Kitchen Pride Mushroom Farms Inc. is an Equal Opportunity Employer and does not discriminate in employment on the basis race, color, creed, national origin, sex, pregnancy, physical or mental disability (unrelated to ability to do the job), age (as defined by law), or other non-merit factors.