

EMPLOYMENT APPLICATION



Frick's Quality Meats, Inc.
360 M.E. Frick Drive
Washington, MO 63090
636-239-2200

PERSONAL INFORMATION *Incomplete information could disqualify you from further consideration.*

Name _____ **Today's Date** _____
(First) (Middle) (Last)

Address _____
(Street) (City) (State) (Zip)

Prior Address _____
(Street) (City) (State) (Zip)

Home Phone # _____ **Mobile Phone #** _____

Are you eligible to work in the U.S.? Yes No

Are you at least 18 years or older? Yes No

During the last seven years, have you ever been convicted of a crime other than minor traffic offense?

A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered. Yes No

If yes, please provide details (dates & location for all convictions) _____

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, please provide company names and details _____

Can you work overtime, including weekends? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

EMPLOYMENT DESIRED

What shift do you prefer? 1st (6am-2:30pm) 2nd (2:30pm-11:00pm) 3rd (10:00pm-6:00am)

Date you can start _____ **Hourly Rate desired** \$ _____

Position desired _____

Are you currently employed? _____ **If so, may we inquire of your present employer?** _____

REFERRAL SOURCE

How did you hear about us? Walk In Advertisement Referral Other _____

Have you ever worked for this company before? Yes No

If yes, please provide date(s) and title _____

Do you know anyone who works for this company? Yes No

If yes, who? _____

EDUCATION *Please Indicate education/training you believe qualifies you for the position you are seeking.*

High School: No. of Years Completed (check one) 1 2 3 4

Diploma: Yes No **G.E.D.:** Yes No

School(s) _____ City/State _____

College and/or Vocational School: No. of Years Completed (check one) 1 2 3 4

School(s) _____ City/State _____

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Major _____ Degrees Earned _____

PREVIOUS EMPLOYERS

Most Recent Employer

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties _____

Per _____
Salary _____ (Hour, Week, Month) _____ Reason for Leaving _____

Second Most Recent Employer

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties _____

Per _____
Salary _____ (Hour, Week, Month) _____ Reason for Leaving _____

Third Most Recent Employer

Company Name _____ City _____ State _____

From _____ **To** _____
Dates Employed _____ Job Title _____ Supervisor Name _____

Duties _____

Per _____
Salary _____ (Hour, Week, Month) _____ Reason for Leaving _____

Certification and Release

-I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Frick's to verify their accuracy and to obtain reference information on my work performance. I hereby release Frick's from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

-I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

-I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ **Date:** _____