



APPLICATION FOR EMPLOYMENT

Ward's Seafood Market is an Equal Opportunity Employer which makes employment decisions without regard to race, color, sex, religion, national origin, age, handicap, sexual orientation, disability, marital status and all other characteristics protected by law. Ward's Seafood Market also reasonably accommodates individuals with handicaps, disabilities and bona fide religious beliefs.

Ward's Seafood Market is a drug-free workplace.

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS. FAILURE TO COMPLETELY ANSWER ALL QUESTIONS WILL RESULT IN DISQUALIFICATION FROM EMPLOYMENT CONSIDERATION.)

Position applied for: _____ Date: _____

PERSONAL DATA:

LAST NAME FIRST NAME MIDDLE SOCIAL SECURITY NUMBER

STREET ADDRESS CITY STATE / ZIP CODE TELEPHONE NUMBER

Are you at least 18 years old? Yes No If not, state your age for child labor law purposes only: _____

Are there any days, shifts or hours you will not work? Yes No If yes, please list the times you will not work: _____

Will you work overtime, if required? Yes No

When will you be able to start work? _____

Have you ever been convicted, pled guilty or pled no contest (nolo contendere) to any crime? Yes No (A conviction or plea of guilty or no contest will not necessarily disqualify you). If yes, please provide the details of the type of crime, the date of the conviction or plea of guilty or no contest, and the penalty imposed: _____

Can you, within three days after employment, submit documentation verifying that you are legally eligible to work in the United States?
 Yes No

Have you taken any illegal drugs in the last 30 days? Yes No

Do you have a reliable form of transportation to work? Yes No

How did you learn of our organization? _____

MILITARY

Branch of Service: _____ Dates of Service: From: _____ To: _____

Were You honorably discharged? Yes No

Describe any military skills, training or experience you believe are relevant to the job applied for: _____

EDUCATION

Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for: _____

EMPLOYMENT HISTORY (Please complete this section beginning with most recent employer):

Company Name: _____ Telephone #: _____

Address: _____
STREET ADDRESS CITY STATE / ZIP CODE

Dates Employed: From: _____ To: _____ Supervisor: _____ Weekly Pay: _____

Job Title	Describe Job Duties	Reason for Leaving

Company Name: _____ Telephone #: _____

Address: _____
STREET ADDRESS CITY STATE / ZIP CODE

Dates Employed: From: _____ To: _____ Supervisor: _____ Weekly Pay: _____

Job Title	Describe Job Duties	Reason for Leaving

Company Name: _____ Telephone #: _____

Address: _____
STREET ADDRESS CITY STATE / ZIP CODE

Dates Employed: From: _____ To: _____ Supervisor: _____ Weekly Pay: _____

Job Title	Describe Job Duties	Reason for Leaving

Please explain any gaps in your employment history: _____

Have you ever been discharged or asked to resign? Yes No

If yes, explain: _____

Did you receive any discipline in the last 12 months of active employment? Yes No

If yes, explain: _____

APPLICANT'S ACKNOWLEDGEMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document will disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document will be cause for my dismissal at any time without prior notice. _____ (initial)

I understand that, if employed, my employment with the Employer is not for a specific term and may be terminated by me or the Employer with or without notice or cause at any time. I further understand that no oral promise, Employer policy, custom, business practice or other procedure (including the Employee Handbook or any policy manuals) constitute an employment contract for a definite duration or modification of the at-will employment relationship. _____ (initial)

I understand that as a part of the application process, the organization may conduct a thorough background check on me, which may include procuring investigative consumer reports, requesting information from my previous employers, confirming my educational background and checking my criminal history. The organization may also seek information regarding my credit history. _____ (initial)

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from the organization at the conclusion of this period, it is my responsibility to complete a new application if I still wish to be considered for employment by the organization. _____ (initial)

Applicant Signature

Date