

Fighting hunger and poverty in northeast North Carolina

Serving Beaufort, Bertie, Camden, Chowan, Currituck, Dare, Gates, Hertford, Hyde, Martin, Northampton, Pasquotank, Perquimans, Tyrrell and Washington Counties.

APPLICATION FOR EMPLOYMENT		Date of application:		
Name:				
Last	First		Middle	
Present domicile add	lress:			
Street	City		State	Zip Code
Permanent residenti	al address if different from above:			
Street	City		State	Zip Code
Phone number:		Email:		
Are you 18 years of a				
Are you prevented fr	om lawfully becoming employed in this co	ountry because of Visa	or immigration	status?
Referred by:			<u>_</u>	
DESIRED EMPLOYME	NT			
Position: Available start Da		te: Desired Salary/Wage		
Are you currently employed? If yes, ma		y we contact your current employer?		
Have you ever applied to FBA before?		If Yes, when?		
Do you have a current state-issued driver's License?		Do you have a driver's license endorsement?		
Have you ever had your license suspended?		If yes, when?		
EDUCATION:	Name and Location of school	Years attended	Graduate?	Area of study
Grammar School		From:		
		То:		
High School/GED		From:		
Program		То:		
College		From:		
		To:		
Correspondence/		From:		
Graduate/Other		To:		

FOOD Bank of the ALBEMARLE APPLICATION FOR EMPLOYMENT **Prior Military or Civil Service experience:** If yes, Rank/Position Are you currently a member of the National Guard or Armed Forces Reserves? Have you ever been convicted of a criminal offense, other than a minor traffic violation? If yes, were they Felony(ies) or Misdemeanor(s)? If yes, how recent was last conviction? Type of conviction(s): Have you ever been convicted of DWI, DUI, or DWLR? If yes, how recent was last offense? EMPLOYMENT HISTORY/FORMER EMPLOYERS (List your last three employers beginning with most recent first) Date Employed Name, Address, Phone Number of Employer Wage/Salary **Position Reason for leaving** From: To: From: To: From: To: PROFESSIONAL AND PERSONAL REFERENCES (Please provide names and contact information for three persons, NOT RELATED TO YOU, whom you have known for at least one year.) **Contact Information** Relationship Name **Address** Years known 1. 2. 3.

"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and if I am employed my employment may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated with or without cause and with or without notice, at any time, at either my discretion or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice at any time by the company."

Signature : By typing my name in the above field, I certify that this is a valid signature for the purposes of form submission.