



265 2nd Street, Stevenson, WA 98648
Phone: 509.427.5491 | Fax: 509.427.4388

APPLICATION FOR EMPLOYMENT

Position Applied for: Unspecified	Date of Application:
How Did You Learn About Us? ☐ Advertisement ☐ Friend ☐ Walk-In ☐ Employment Agency ☐ Relative ☐ Other _____	

Last Name	First Name	Middle Name
Physical Address	City	State Zip Code
Mailing Address (if different)	City	State Zip Code
Home Telephone	Mobile Telephone	Email Address

Can you provide required proof of your eligibility to work in the United States?

(Proof of eligibility to work in the United States will be required upon employment.)

☐ Yes ☐ No

Have you ever applied to work with us before? ☐ Yes ☐ No If Yes, give date _____

Have you ever been employed with us before? ☐ Yes ☐ No If Yes, give date _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

On what date would you be available to work? _____

Are you available to work: ☐ Full Time ☐ Part Time

Please indicate the days and times you would be available to work:

Sunday _____ Monday _____ Tuesday _____

Wednesday _____ Thursday _____ Friday _____ Saturday _____

WE ARE AN AT-WILL, EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, marital or veteran status, disability, sexual orientation or any other legally protected status.

Please return application in person, by email to andra@ajmarket.com

Employment Experience

A resume may be submitted in lieu of completing this page

Start with your current and/or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, sexual orientation or other protected status. If you need additional space, please continue on a separate sheet of paper.

Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)			
Job Title			
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)			
Job Title			
Reason for Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number(s)			
Job Title			
Reason for Leaving			

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills: Check Skills/Equipment Operated

☐ Register	☐ Word	Machinery (list):
☐ PC	☐ Excel	_____
☐ POS System	☐ Deli/Bakery Equipment	_____

Education

	Name and Address of School	Years Attended	Currently Attending? (y/n)
High School		-	N/A
Community or Technical College		-	N/A
Undergraduate College		-	N/A
Graduate Professional		-	N/A
Other (Specify)		-	N/A

Personal References

1.	Name	Relationship
	Phone	Email Address
2.	Name	Relationship
	Phone	Email Address
3.	Name	Relationship
	Phone	Email Address

Applicant's Statement:

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that this application for employment shall be considered active for a period of time not to exceed 45 days, and that if I wish to be considered for employment beyond this time period I should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, if hired, my employment would be of an "AT WILL" nature, which means that I may resign at any time and the Employer may discharge me at any time and for any or no reason, and with or without notice.

In the event I am hired, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant

Date

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