

**PERSONAL
INFORMATION**

Name _____
(Print) (last) (first) (middle)

Address _____
(street) (city) (state) (zip)

Phone () _____ Name (if message phone) _____

Referred By _____

Are you a Veteran? Yes No

**EMPLOYMENT
DESIRED**

Position _____

Date Available for Employment _____

Ever Employed by this Company before? _____ (When?) _____

**EDUCATION
& TRAINING**

_____ (name of last school attended) _____ (dates)

_____ (address)

_____ (city) _____ (state) _____ (zip)

Circle last year completed:

Grade 5 6 7 8 9 10 11 12 College 1 2 3 4 5

List applicable courses, certifications, diplomas, degrees or licenses: _____

Other Training or Skills (include military) _____

**FORMER
EMPLOYERS**

Start with your present position and work back:

1. _____

(name of firm) _____ (your job title)

(address) _____ Summary of your duties: _____

(city) _____ (state) _____

(supervisor) _____ (title) _____

Employed from: _____ to _____
(month and year) (month and year)

Reason for leaving _____

May we contact this employer? Yes No

Phone Number () _____

FORMER EMPLOYERS

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(name of firm)

(your job title)

(address)

Summary of your duties:

(city)

(state)

(supervisor)

(title)

Employed from: _____ to _____
(month and year) (month and year)

Reason for leaving _____

May we contact this employer? Yes No

Phone Number () _____

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(name of firm)

(your job title)

(address)

Summary of your duties:

(city)

(state)

(supervisor)

(title)

Employed from: _____ to _____
(month and year) (month and year)

Reason for leaving _____

May we contact this employer? Yes No

Phone Number () _____

ADDITIONAL INFORMATION

List any other information including employment, volunteer and community work which might be helpful in determining your qualifications for the position:

PERSONAL REFERENCES

Name

Address

Phone

1. _____
2. _____
3. _____

(not related to you)

Are you legally able to be employed in the U.S.? Yes No

I certify that all statements made by me on this application are true and complete to the best of my knowledge and I have withheld nothing that, if disclosed, would affect this application unfavorably. I understand that if employed, any false statements on this application shall be sufficient cause for dismissal.

Signature

Date

CONSENT & RELEASE FORM

Criminal Background Check

Full Name: _____ Date of Birth: _____

All states lived in for the last three years since my 18th birthday: _____

I, the above-named, hereby consent, authorize and grant permission to Eden General Store, Inc., its employees, and/or its agents, to perform a thorough criminal background check on me. I also consent to the release of any information discovered in said background check to the above named. I further understand that my employment in said facility may be terminated and/or affected due to information disclosed by my background check.

I hereby release Eden General Store, Inc. from all liability arising from the performance of, or the release of information from, this background check and I understand that this release covers liability, claims and actions caused entirely or in part by any acts or failures to act by Eden General Store, Inc. (or its officers, employees, or agents), including but not limited to negligence, mistake, or failure to supervise by Eden General Store, Inc. I freely agree that I am personally responsible for all risks and any and all damages arising in any manner from the performance of, or the release of information from, this background check.

I certify either that I am over the age of eighteen OR if I am under the age of eighteen, I certify that my parent/legal guardian has read this consent/release, agrees to the terms contained herein and has signed below. My signature hereunder indicates that I have read, fully understand and agree to the terms contained in this legally-binding document.

Signature Date

Signature of parent/legal guardian Date

If under 18 years of age