



# Employment Application

86 S. Division Street  
Battle Creek, MI 49017  
Phone: 269-968-6136  
Fax: 269-968-9146  
www.normanfoods.com

Please Read Before Filling Out This Application

This Company does not discriminate in hiring or employment on the basis of race, color, sex, religion, national origin, age, disability, or veteran status. No question on this application is intended to secure information to be used for such discrimination. Upon request, the company will provide reasonable accommodations to qualified individuals with disabilities provided they do not pose an undue hardship on the business.

We intend to check and hold you responsible for the accuracy of the statements you make on this application. This application will receive consideration for thirty (30) days. If you have not heard from the Company within thirty days and wish to receive further consideration for employment, it will be necessary to complete another application.

## REFERRAL SOURCE

Positions applied for ( PLEASE PRINT ): \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Walk-in                       Government Employment Agency                       Private Employment Agency  
 Employee                       Relative                       School  
 Advertisement - Source \_\_\_\_\_  Other \_\_\_\_\_  
Name of person who referred you ( IF APPLICABLE ) \_\_\_\_\_

## PERSONAL DATA

Social Security Number \_\_\_\_\_

Name \_\_\_\_\_ Are you 18 years or older?  Yes  No  
(Last) (First) (Middle)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone Number ( \_\_\_\_\_ ) \_\_\_\_\_

List other names you have been known by, including maiden name \_\_\_\_\_

Valid Driver's License No. \_\_\_\_\_ State and Date of Issue \_\_\_\_\_

May we contact you at work?  Yes  No

If hired, can you provide proof that you are eligible to work in the U.S.?  Yes  No

Have you been convicted of a crime in the last 7 years (excluding parking tickets and non-moving motor vehicle traffic violations)?\*  Yes  No

If yes, please provide for each separate conviction (a) crime convicted of (b) date of conviction (c) county and state of conviction \_\_\_\_\_

\* Conviction of a crime will not necessarily disqualify you from the job for which you are applying. Each conviction and explanation will be considered in relation to the position for which you are applying.

## EDUCATIONAL DATA

CIRCLE HIGHEST GRADE COMPLETED:																				
1 2 3 4 5 6 7 8 9 10 11 12												1 2 3 4 5					1 2 3 4			
JUNIOR HIGH OR HIGH SCHOOL												COLLEGE OR UNIVERSITY					GRADUATE SCHOOL			
TYPE OF SCHOOL	NAME OF SCHOOL					LOCATION CITY & STATE					MAJOR SUBJECT OR COURSE OF STUDY				DEGREE OBTAINED					
HIGH																				
COLLEGE																				
BUSINESS OR TRADE																				
CORRESPONDENCE																				
OTHER (SPECIFY)																				
GRADUATE SCHOOL																				

# EMPLOYMENT

Position applied for \_\_\_\_\_ Date you can start \_\_\_\_\_ Salary desired \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ If so, may we contact your present employer? \_\_\_\_\_

Have you ever applied here before? \_\_\_\_\_ When? \_\_\_\_\_

Have you ever been employed by Norman Foods? If yes, give dates:  
 \_\_\_\_\_

# WORK HISTORY

List most recent first, all periods of unemployment should be shown in a separate block. The following information must be supplied in full even if you attach a resumé.

PERIOD OF EMPLOYMENT (MONTH/YEAR)	NAME AND ADDRESS OF COMPANY	POSITIONS HELD	RATE OF PAY
FROM:	COMPANY	POSITION	START:
	STREET & NO.	SUPERVISOR	
TO:	CITY & STATE	PHONE	FINAL:
REASON FOR LEAVING:			
FROM:	COMPANY	POSITION	START:
	STREET & NO.	SUPERVISOR	
TO:	CITY & STATE	PHONE	FINAL:
REASON FOR LEAVING:			
FROM:	COMPANY	POSITION	START:
	STREET & NO.	SUPERVISOR	
TO:	CITY & STATE	PHONE	FINAL:
REASON FOR LEAVING:			
FROM:	COMPANY	POSITION	START:
	STREET & NO.	SUPERVISOR	
TO:	CITY & STATE	PHONE	FINAL:
REASON FOR LEAVING:			
FROM:	COMPANY	POSITION	START:
	STREET & NO.	SUPERVISOR	
TO:	CITY & STATE	PHONE	FINAL:
REASON FOR LEAVING:			



## REFERENCES

Give three references, not relatives or former employers:

NAME	OCCUPATION	YEARS KNOWN	PHONE	ADDRESS

## APPLICATION FORM DISCLAIMER

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Norman Foods, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned. Both the undersigned and Norman Foods, may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application, I understand that misrepresentation or omission of facts may be cause for dismissal at any time without any previous notice. I authorize the investigation of all matters contained in this application and hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that the Company will employ only those individuals who are legally authorized to work in the United States and who present acceptable proof of their lawful employment status and identity, and that any offer of employment is conditional upon the satisfactory completion of the verification process required by the Immigration Reform and Control Act of 1986.

The Fair Credit Reporting Act requires us to advise you that, in connection with our routine processing of your employment application, we may request from a consumer reporting agency an investigative consumer report including information as to your character, general reputation, personal characteristics, mode of living, and motor vehicle operating records. Upon written request from you, we will provide you with additional information concerning the nature and scope of any such report requested by us.

If employed, I agree to abide by the employment policies, practices, and procedures of this Company, to obey safety and work rules, and to conduct myself in a manner that conforms to the standards of conduct required of Norman Foods employees. I further understand that my employment with this Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period and thereafter, my employment relation with the company is terminable at will for any reason by either party.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

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This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, citizenship, age, disability or veteran status. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in Norman Foods.