



# Gummer Wholesale, Inc.

## Application For Employment

Position Applied For:	Shifts Available to work: ___1st ___2nd ___3rd	Date of Application:
Are you available to work overtime?: ___yes ___no	Date Available to start work:	Salary Expectations: _____hourly _____yearly

How did you learn about Gummer Wholesale, Inc.?:  
 \_\_\_Advertisement \_\_\_Employment Agency \_\_\_Employee \_\_\_Walk-In \_\_\_Other: \_\_\_\_\_

### Personal Information

Last Name:		First Name:		Middle Name:	
Social Security Number:		Street Address:		City, State, Zip Code:	
Home Telephone:	Alternate Telephone:	Are you over age of 18?:	Have you ever been bonded?: ___yes ___no If yes, with what employer?		
Are you a U.S. Citizen?: ___yes ___no	If no, are you authorized to work in U.S.?: Explain.		Are you a member of a professional or civic organization? (Please exclude those which may disclose your race, color, religion, or national origin):		

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses which have not been annulled, expunged, or sealed by a court?

### Educational Information

Type of School:/ Name	Location of School:	Courses of Study:	Circle Last Year Completed:	Degree/Diploma:
High School:			1 2 3 4 5 6 7 8 9 10 11 12	
College:			1 2 3 4 5 6 7 8 9 10 11 12	
Technical:			1 2 3 4 5 6 7 8 9 10 11 12	
Additional Education:			Scholastic Honors/Certificates:	

Please list any skills that may pertain to the position in which you are applying for:

OFFICE USE ONLY:

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

### Employment Information

Company Name:	Street Address:	City/State/Zip Code:	Telephone:	Supervisor Name/Position:
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Position:	From: Mo/Yr	To: Mo/Yr	Salary: Starting      Ending	Reason for Leaving:	Brief Description of Position:
Company Name:	Street Address:		City/State/Zip Code:	Telephone:	Supervisor Name/Position:
Position:	From: Mo/Yr	To: Mo/Yr	Salary: Starting      Ending	Reason for Leaving:	Brief Description of Position:
Company Name:	Street Address:		City/State/Zip Code:	Telephone:	Supervisor Name/Position:
Position:	From: Mo/Yr	To: Mo/Yr	Salary: Starting      Ending	Reason for Leaving:	Brief Description of Position:

May we contact your present employer?:     yes     no

### Professional References

Name	Position	Company Name	Address	Phone	Relationship

I certify the information I have given on this application and resume I have submitted is true and complete and understand, should I be hired, any misrepresentation or concealment of information may result in my discharge at any time.

I hereby attest, under penalty or perjury that I am lawfully permitted to work in the United States. I understand that if an offer of employment is made by the Company, I will be required to present satisfactory documentation of personal identity and employability before I am hired.

I hereby authorize the Company to investigate my records with my employers, school, organizations, references, and where deemed necessary, to obtain a consumer report as defined in Section 603 (d) of the Fair Credit Reporting Act, and I release the Company and all informants from such an investigation. I understand that should employment be denied based upon information contained in a consumer report obtained from a consumer reporting agency, the Company will supply the name and address of the consumer reporting agency.

If hired, I agree to abide by the policies and expectations of the Company and understand that my employment is "at will" and can be terminated by me or by the Company at any time with or without cause subject only to applicable requirements of law and I will be paid only for services rendered to the time of my termination. In the event the Company advances me money or other items of value, or I otherwise become indebted financially to the Company, I agree to repay the Company and also agree any wages due me upon termination may be offset by payroll deduction against any such monies due the Company.

Nothing herein or during my employment shall be considered an employment contract and I understand no party has authority to vary the foregoing condition, with the sole exception of written variances signed by the President of the Company.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# Gummer Wholesale, Inc.

## Employment Application



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status. Applicants may be subject to a drug screening and criminal background check.

Position Applied For:	Desired Salary/Hourly Rate: _____ hourly	Shifts Available: ___ 1st ___ 2nd ___ 3rd	Are you available to work overtime? ___ yes ___ no	Date of Application: ___ / ___ / ___
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Date available: \_\_\_\_\_

How did you learn about Gummer Wholesale, Inc.?  
 \_\_\_ Advertisement \_\_\_ Employment Agency \_\_\_ Friend \_\_\_ Relative \_\_\_ Walk-In \_\_\_ Other

### Personal Information

Last Name:	First Name:	M.I.
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Street Address:	City:	State:	Zip Code:	Home Phone:
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Alternative Phone:	Social Security Number:	Have you ever been bonded?: If yes, please list the employer name. ___ yes ___ no
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Are you over 18 years of age? ___ yes ___ no	Do you have membership in professional or civic organizations and interests? <small>(exclude those which may disclose your race, color, religion, or national origin)</small>
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Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses which have not been annulled, expunged or sealed by a court? \_\_\_ yes \_\_\_ no

### Education

Type of School	Name	Location	Course(s) of Study	Circle Last Year Completed	Degree
High School				1 2 3 4	
College				1 2 3 4	
Trade School				1 2 3 4	
Additional				1 2 3 4	

### Skills

Scholastic Honors:	_____
Check all that apply:	___ Typing ___ wpm ___ Ten-Key ___ Data Entry ___ npm ___ Multi-Line Phone ___ Forklift
PC Programs:	___ Word ___ Excel ___ PowerPoint ___ Publisher ___ Access ___ Internet Explorer ___ Outlook
Office Equipment:	___ Copier ___ Facsimile ___ Other _____

Office Use Only:

## Employment History

Please complete employment history starting with present or last position. (Please complete whether or not you have attached a resume.)

Company:	Position Held:	From:	To:	Salary:
		/ /	/ /	Start      End
Address:	Supervisor:	Reason For Leaving:		
City/State/Zip:	Phone:			
Company:	Position Held:	From:	To:	Salary:
		/ /	/ /	Start      End
Address:	Supervisor:	Reason For Leaving:		
City/State/Zip:	Phone:			
Company:	Position Held:	From:	To:	Salary:
		/ /	/ /	Start      End
Address:	Supervisor:	Reason For Leaving:		
City/State/Zip:	Phone:			

May we contact your present employer?      yes      no

### References

Name	Phone	Job Title	Relationship
1			
2			
3			
4			

I certify the information I have given on this application and resume is true and complete and understand, should I be hired, any misrepresentation or concealment of information may result in my discharge at any time.

I hereby attest, under penalty of perjury that I am lawfully permitted to work in the United States. I understand that if an offer of employment is made by the company, I will be required to present satisfactory documentation of personal identity and employability before I am hired.

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Nothing herein or during my employment shall be considered an employment contract and I understand no party has authority to vary the foregoing condition, with the sole exception of written variances signed by the President of the company.

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_