

# ADRIEN'S SUPERMARKET, INC.

## APPLICATION FOR EMPLOYMENT

**\*\*ANY FALSE INFORMATION ON THIS APPLICATION COULD LEAD TO TERMINATION\*\***

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ STATUS: SINGLE \_\_\_ MARRIED \_\_\_

EDUCATION: GRADE SCHOOL \_\_\_\_\_ HIGH SCHOOL \_\_\_\_\_  
COLLEGE \_\_\_\_\_ SPECIAL TRAINING \_\_\_\_\_

RETAIL EXPERIENCE: \_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_

CAN WORK: FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ DATE AVAILABLE: \_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY: NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

### EMPLOYMENT HISTORY:

NAME AND ADDRESS OF COMPANY	TELEPHONE	FROM	TO
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DESCRIBE WORK YOU DID	REASON FOR LEAVING
_____	_____
_____	_____
_____	_____

**ALL EMPLOYMENT BASED ON 90 DAY TRIAL PERIOD**

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_