

# Vermont Packinghouse LLC

25 Fairbanks Rd. North Springfield, VT 05150  
(802)886-8688

## APPLICATION FOR EMPLOYMENT

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.

(PLEASE PRINT)

<b>Position(s) Applied For:</b>	<b>Salary Desired:</b>	<b>Date of Application:</b>	
<b>Last Name</b>	<b>First</b>	<b>Middle</b>	
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Telephone Numbers(s)</b> Home (    )	<b>E-Mail:</b>		

Have you ever filed an application with us before?      Yes\_\_\_ No\_\_\_    If yes, when? \_\_\_\_\_

How did you learn about us?    Ad\_\_\_    Employment Agency\_\_\_    Friend\_\_\_    Relative\_\_\_    Other \_\_\_\_\_

Are you available to work:    Full Time\_\_\_\_\_    Part Time\_\_\_\_\_    Temporary\_\_\_\_\_

Specify days and hours if part time \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_

What shifts are you interested in?    \_\_\_ First Shift    \_\_\_ Second Shift    \_\_\_ Third Shift    \_\_\_ Any

Are you at least 18 years of age or older? ..... Yes\_\_\_    No\_\_\_

Do you have a valid Driver's license or ID card issued by a State or outlying possession of the United States provided it contains photograph or information such as name, date of birth, gender, height, eye color and address? ..... Yes\_\_\_    No\_\_\_

Are you currently employed? ..... Yes\_\_\_    No\_\_\_

May we contact your present employer? ..... Yes\_\_\_    No\_\_\_

If offered the position are you willing to have post-offer physical and drug screening?    Yes \_\_\_    No\_\_\_

If offered the position are willing to have a background check ran?    Yes \_\_\_    No\_\_\_

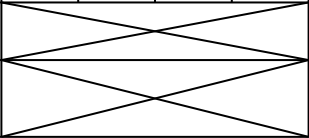
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? ..... Yes\_\_\_    No\_\_\_  
(Proof of citizenship or immigration status will be required upon employment)

Are you fully capable of performing tasks that involve repetitive motion?    Yes\_\_\_    No\_\_\_

Are you fully capable of lifting 60 lbs. consistently throughout a work day?    Yes\_\_\_    No\_\_\_

**We Are an Equal Opportunity Employer**

**Education**

	Elementary School				High School				Undergraduate College/University				Graduate/Professional			
School Name And Address																
Years Completed	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																
Describe Course of Study																
Describe any specialized training, apprenticeship, skills, and extra-curricular activities.																
Describe any honors you have received.																
State any additional information you feel may be helpful to us in considering your application.																

**References – Please list references from previous employment that are not relatives**  
(Give name, name of company, their position, address, and phone #)

1. _____
2. _____
3. _____

Were you in the U.S. Armed Forces? ..... Yes \_\_\_\_ No \_\_\_\_

If yes, what branch and dates?

\_\_\_\_\_

Please describe any job-related training:

\_\_\_\_\_

\_\_\_\_\_

# Employment

List below all past and present employment, beginning with your most recent.

Employer		Dates From:                      To:	
Address			
Telephone Number(s)	Reason For Leaving	Duties Performed	
Job Title			
Supervisor			
Employer		Dates From:                      To:	
Address			
Telephone Number(s)	Reason For Leaving	Duties Performed	
Job Title			
Supervisor			
Employer		Dates From:                      To:	
Address			
Telephone Number(s)	Reason for Leaving	Duties Performed	
Job Title			
Supervisor			

## Authorization

I understand that the employer follows an “employment at will” policy, in that the employer or I may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment. I understand that to be employed, I must be lawfully authorized to work in the United States and must show the employer documents to prove this.

I understand that the company will investigate my work and personal history and verify all the data given on this application, on related papers and in the interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information about me, and release them from all liability for damage in providing this information.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Applicant’s Signature \_\_\_\_\_

Date \_\_\_\_\_