



EMPLOYMENT APPLICATION

Please write legibly and complete the front and back pages.

PERSONAL INFORMATION	
FULL NAME	TODAY'S DATE
ADDRESS	
EMAIL	
HOME PHONE	CELL PHONE

AVAILABILITY <small>Please complete the following availability chart to indicate ALL the possible days and hours you are available to work. Most departments at VVF may begin as early as 7:00 a.m. and end no later than 7:30 p.m.</small>							
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
START TIME							
END TIME							

MAX HOURS YOU WANT TO WORK:		<i>We cannot guarantee days of the week or number of hours but we will do our best to accommodate requests.</i> <i>If you are hired and any of your availability should change, you will be required to fill out an Availability Change Form and return it to the office ASAP.</i>
MAX SHIFTS YOU WANT TO WORK:		

*** DATE YOU CAN START WORK:

GENERAL INFORMATION			
Are you at least 16 years old?	YES <input type="checkbox"/> NO <input type="checkbox"/>		
Have you ever been employed at VVF in the past?	YES <input type="checkbox"/> NO <input type="checkbox"/>		
If YES, please enter most recent date of employment and department/position.	<table border="1"> <tr> <td>DATE</td> <td>DEPARTMENT/POSITION</td> </tr> </table>	DATE	DEPARTMENT/POSITION
DATE	DEPARTMENT/POSITION		
Do you have any physical limitations that would prohibit you from performing any of the following tasks? Standing for long periods, lifting up to 50 lbs, stooping, bending, reaching, pushing, and/or pulling.	YES <input type="checkbox"/> NO <input type="checkbox"/>		
If YES, please explain:			

EDUCATION				
	NAME OF SCHOOL	YEARS ATTENDED	GRADUATED?	DEGREE/AREA OF STUDY
HIGH SCHOOL OR EQUIVALENT				
COLLEGE				
TRADE SCHOOL				

EMPLOYMENT HISTORY <small>Beginning with your current or most recent employer, please provide ALL information requested.</small>				
COMPANY	DATES OF EMPLOYMENT	TITLE & RESPONSIBILITIES	SUPERVISOR	REASON FOR LEAVING
PHONE			PHONE	
PHONE			PHONE	

EMPLOYMENT HISTORY (CONTINUED)				
COMPANY	DATES OF EMPLOYMENT	TITLE & RESPONSIBILITIES	SUPERVISOR	REASON FOR LEAVING
PHONE			PHONE	
PHONE			PHONE	

How many scheduled work days have you missed in the last year from your most recent employer?

If you are planning to leave your current job, please explain why.

As part of our consideration for employment, we may conduct reference checks with previous employers to determine work ethic, attendance, quality of work, attitude, customer service, sales ability, and relevant experience. All information obtained will be kept confidential.

SKILLS & EXPERIENCE

What skills or experience do you have that have prepared you for a position at VVF?

What are your career objectives for the next two years?

Please provide any additional information that you feel will be of value to us when considering your application for employment with us.

REFERENCES List two personal references who are not relatives or former supervisors.

NAME	PHONE NUMBER	RELATIONSHIP	YEARS KNOWN

APPLICANT'S STATEMENT

By signing below, I acknowledge that the information I have provided is true and correct to the best of my knowledge. I understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from my employment with Valley View Farms.

I understand that nothing on this application implies or creates an employment relationship or contract for employment.

I understand that, if hired by VVF, my employment is at-will and can be terminated at anytime, with or without notice, for any reason.

Signature of applicant Date

Please return completed application to the main store, or email a copy to jobs@valleyviewfarms.com