

# Cornucopia – Application For Employment

## Personal Information

Name (Last, First, MI)

Street address

City, State, Zip

Home Phone number

Work Phone number

Cell/Fax number

E-mail address

Cell:

Social security number

Driver's license number/state/expiration

## Employment Desired

Position applied for

How did you hear about this position?

Date available for work

Desired hours (full time, part time, etc.)

**Education** – it is not necessary to complete this section if you are submitting a resume.

|                        | Name and Address of School | Course of Study | Total Years of Study | Degree/ Diploma |
|------------------------|----------------------------|-----------------|----------------------|-----------------|
| High School            |                            |                 |                      |                 |
| Undergraduate College  |                            |                 |                      |                 |
| Graduate/ Professional |                            |                 |                      |                 |
| Other (Specify)        |                            |                 |                      |                 |

List any seminars, classes or other education not listed above which may help qualify you for this position (if you need additional space, please use page 6):

See Resume

.....

.....

.....

Last Name, First Initial:

Today's Date:

# Cornucopia – Application for Employment

## Employment History

List below all present and past employers over the past ten years, starting with your **most recent** employer. Account for all periods of unemployment. It is not necessary to complete this section if you are attaching a resume. May we contact your current employer?  YES  NO

|  |                                  |                              |                  |                |   |
|--|----------------------------------|------------------------------|------------------|----------------|---|
| 1.   | Employer (current Yes___ No ___) |                              | Start<br>(Mo/Yr) | End<br>(Mo/Yr) | Essential job functions of final position |
|  | Address                          |                              |                  |                | 1.  |
|  | City, State, Zip                 |                              | Starting Pay     | Ending Pay     | 2.  |
|  | Phone number                     |                              |                  |                | 3.  |
|  | Fax number                       | Supervisor(s)                |                  |                | 4.  |
|  | Job position(s)                  | E-mail address of supervisor |                  |                |   |
|  | Reason(s) for leaving            |                              |                  |                |   |
| What value did you add to this company or its customers? |                                  |                              |                  |                |   |
| -----  |                                  |                              |                  |                |   |
| -----  |                                  |                              |                  |                |   |
| 2.   | Employer                         |                              | Start<br>(Mo/Yr) | End<br>(Mo/Yr) | Essential job functions of final position |
|  | Address                          |                              |                  |                | 1.  |
|  | City, State, Zip                 |                              | Starting Pay     | Ending Pay     | 2.  |
|  | Phone number                     |                              |                  |                | 3.  |
|  | Fax number                       | Supervisor(s)                |                  |                | 4.  |
|  | Job position(s)                  | E-mail address of supervisor |                  |                |   |
|  | Reason(s) for leaving            |                              |                  |                |   |
| What value did you add to this company or its customers? |                                  |                              |                  |                |   |
| -----  |                                  |                              |                  |                |   |
| -----  |                                  |                              |                  |                |   |

# Cornucopia – Application for Employment

## Employment History Continued...

|    |  |                              |                 |   |    |
|----|--|------------------------------|-----------------|---|----|
| 3. | Employer   | Start Date                   | End Date        | Essential job functions of final position |    |
|    | Address  |                              |                 | 1.  |    |
|    | City, State, Zip   |                              | Starting Salary | Ending Salary                             | 2. |
|    | Phone number   |                              |                 |   | 3. |
|    | Fax number   | Supervisor(s)                |                 | 4.  |    |
|    | Job position(s)  | E-mail address of supervisor |                 |   |    |
|    | Reason(s) for leaving                                    |                              |                 |   |    |
|    | What value did you add to this company or its customers? |                              |                 |   |    |
|    | -----  |                              |                 |   |    |
|    | -----  |                              |                 |   |    |
| 4. | Employer   | Start Date                   | End Date        | Essential job functions of final position |    |
|    | Address  |                              |                 | 1.  |    |
|    | City, State, Zip   |                              | Starting Salary | Ending Salary                             | 2. |
|    | Phone number   |                              |                 |   | 3. |
|    | Fax number   | Supervisor(s)                |                 | 4.  |    |
|    | Job position(s)  | E-mail address of supervisor |                 |   |    |
|    | Reason(s) for leaving                                    |                              |                 |   |    |
|    | What value did you add to this company or its customers? |                              |                 |   |    |
|    | -----  |                              |                 |   |    |
|    | -----  |                              |                 |   |    |

# Cornucopia - Application for Employment

## Additional Information

List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.

.....

.....

.....

.....

.....

.....

.....

.....

List any languages other than English that you can speak, read or write that could be of benefit to the position applied for:

|       | Fluent | Good | Fair |
|-------|--------|------|------|
| Speak |        |      |      |
| Read  |        |      |      |
| Write |        |      |      |

Identify job training and experience you possess that relates to this position:

.....

.....

.....

.....

.....

Identify what skills, desires, and personality traits you possess related to this position and/or the work we do at Cornucopia:

.....

.....

.....

.....

.....

Please describe any computer or typing skills you have. List computer applications you can effectively use:

.....

.....

.....

.....

.....

Describe what you believe are the most unique features of your work history:

.....

.....

.....

.....

.....

# Cornucopia – Application for Employment

## Additional Information:

|  |                              |   |
|--|------------------------------|---|
| Have you ever been employed with this company before?<br>If Yes, when?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| Do you have any friends or relatives employed by this company?<br>If Yes, please provide their names and relationship to you:  | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| ---Name:   | Relationship:                |   |
| ---Name:   | Relationship:                |   |
| Are you currently employed?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| May we contact your employer?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| Are you currently on “lay off” status and subject to recall?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| If hired, can you prove U.S. citizenship or your legal right to work in the U.S.?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| If hired, do you have a reliable means of transportation to and from work?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| Do you have, or are you willing to get, a telephone w/ voice messaging?  | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| Can you lift 50 pounds without assistance?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| If hired, are there any accommodations the company would need to provide so that you can perform all those essential functions and duties of the position being applied for? If Yes, please explain in the ‘Additional Space’: | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| If driving is a requirement of the position applied for, have you been convicted of Driving Under the Influence “(DUI)” in the last 7 years, or do you currently have any pending DUI charges?                                 | <input type="checkbox"/> Yes | <input type="checkbox"/> No<br><input type="checkbox"/> N/A |
| Have you ever been convicted of, or do you currently have any pending, felony or misdemeanor charges, to include any sex-related, child abuse, or domestic abuse related offenses?   | <input type="checkbox"/> Yes | <input type="checkbox"/> No                                 |
| If Yes, please explain:  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |
|  |                              |   |

A criminal record does not constitute an automatic bar to employment and will be considered only as it substantially relates to the job in question. If you are applying for a position with our company in the following states, please read the following instructions before responding.



# *Cornucopia* – Application for Employment

*Please read each statement closely and initial each acknowledging your understanding*

## **Equal Employment Opportunity Statement**

\_\_\_\_\_ This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

## **Discrimination and Sexual Harassment Policy Statement**

\_\_\_\_\_ This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

## **Disclosure to Applicants Concerning Drug/Alcohol Testing**

\_\_\_\_\_ If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

## **Complete and Accurate Information**

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

## **Testing Authorization**

\_\_\_\_\_ If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.

# ***Cornucopia* – Application for Employment**

\_\_\_\_\_ **At-Will Employment**

I understand and agree that if I am employed, my employment will be “at-will”, which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by Cornucopia’s Executive Director and Board President.

\_\_\_\_\_ **Investigation Authorization**

I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving, and criminal background.

\_\_\_\_\_ **Company Obligation**

I understand and agree that the Company’s acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.

I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.

\_\_\_\_\_  
Signature







**AUTHORIZATION FOR RELEASE OF INFORMATION  
CONSUMER REPORT CONSENT (EMPLOYMENT)**

I, \_\_\_\_\_, acknowledge that Cornucopia, Inc., with whom I am employed, or to whom I have submitted an employment application, has advised me that the information requested below concerning my background is required to assist the Company in making an employment determination. The information developed and this document also may be used in determining my qualifications for future assignments and/or retention.

I hereby authorize the Company, its agents, or designated representatives bearing this document, or a copy hereof, to obtain information relating to my educational, credit, employment, and criminal history background from any law enforcement, criminal justice, or other government agencies, employers, ex-employers, and individual persons. Any and all agencies, organizations, institutions, governmental bodies, companies or individuals are released from any liability for providing this information.

Furthermore, I hereby release any individual of the Company to include, but not limited to, record custodians, directors, agents, employees or any other authorized representatives of the Company from any and all liability for damages of whatever kind and nature, which may at any time accrue to me on account of (1) reliance by such persons on the information submitted in my employment application; (2) reliance by such persons on the information obtained pursuant to this authorization; (3) compliance with, or any attempts to comply with, this authorization; and (4) termination of my employment, if commenced, based upon information developed pursuant to this authorization.

I hereby certify that all statements and answers set forth on my application are true and complete to the best of my knowledge and I understand that subsequent to employment if any such statements and/or answers are found false or that information has been intentionally omitted, such false statements or omissions will be just cause for termination of my employment.

I hereby acknowledge that I have read and understand the Federal Fair Credit Reporting Act Consumer Report Disclosure regarding the obtaining of a Consumer Report about me from a Consumer Reporting Agency. I hereby authorize the Company to obtain Consumer Reports from Consumer Reporting Agencies to aid in its determination of whether to hire or continue to employ me. I understand that I have certain rights under the Fair Credit Reporting Act, as disclosed in the Disclosure, and that I can receive further information regarding my rights by contacting the Federal Trade Commission.

I hereby certify that I have read and understand the foregoing.

Printed Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SSN: \_\_\_\_\_

State of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Last Address (if resided in last 7 years): \_\_\_\_\_

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