



FURMANO FOODS

EOE/Disabled/Veterans Employer

A Tobacco Free environment

SEASONAL EMPLOYMENT APPLICATION

mbr 5/15

APPLICANT INFORMATION: Please, print

Name: _____ Date: _____
 (Last, First)
 Address _____ Apt no. _____
 City _____ State _____ Zip Code _____ Date available: _____
 Email Address: _____

1 Phone # _____	Circle the shift you	1st	2nd	3rd	(1) 12 hr	(2) 12 hr	Preference
2 Phone # _____	are willing to work:	7am-3pm	3pm-11pm	11pm-7am	6am-6pm	6pm-6am	

ABILITIES: Please, check the abilities that you possess:

Lift 10 lbs	<input type="checkbox"/>	Drivers License	<input type="checkbox"/>	Write Legible	<input type="checkbox"/>	Prolonged and repeated:	
Lift 20 lbs	<input type="checkbox"/>	Forklift Operation	<input type="checkbox"/>	Good Communicator	<input type="checkbox"/>	Extension of arms	<input type="checkbox"/>
Lift 40 lbs	<input type="checkbox"/>	Driver Class A, CDL	<input type="checkbox"/>	Equipment Operator	<input type="checkbox"/>	Bending at waist	<input type="checkbox"/>
Lift 60 lbs	<input type="checkbox"/>	Jockey Driver	<input type="checkbox"/>	Detail Oriented	<input type="checkbox"/>	Standing	<input type="checkbox"/>
Lift 80 lbs	<input type="checkbox"/>	Field Tractor Driver	<input type="checkbox"/>	Basic Math Skills	<input type="checkbox"/>	Walking	<input type="checkbox"/>
Lift 100 lbs	<input type="checkbox"/>	Machine Operator	<input type="checkbox"/>	Computer skills	<input type="checkbox"/>	Sitting	<input type="checkbox"/>
						Lifting	<input type="checkbox"/>

EDUCATION: Please, circle your level of education and specify trade or type of studies:

GED	High School	Trade School:	College:
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Additional Courses, training or certifications acquired: _____

EMPLOYMENT HISTORY: Please, fill all the blanks:

Employer/Supervisor	From	To	Reason for Separation:	Duties and responsibilities:
1 _____	(month/year)	(month/year)	_____	_____
2 _____	_____	_____	_____	_____
3 _____	_____	_____	_____	_____

MILITARY SERVICE: Have you ever served or currently serving in the military? yes no

Branch of Service _____ From/to: _____ Rank at Discharge: _____ Type of Discharge: _____

GENERAL QUESTIONS: Please, circle the correct answer and fill in the blanks.

Have you ever been convicted of, or pled guilty or nolo contendere to, any felony or misdemeanor crime? yes or no
If you answer yes above, please list all crimes which you have been convicted of or pled guilty or nolo contendere to and include the date of the offense. Please note that you will not automatically be excluded from consideration based upon a criminal record. Your suitability for the position sought will be evaluated based upon the circumstances in order to determine whether the criminal record renders you unsuitable for the job.

Are you a citizen of the United States?

yes no If you are not a citizen, you must provide proof of work permit in the U.S.A.

Have you been terminated from a previous employer or asked to resign?

yes no If yes, explain: _____

Are you 18 years or older?

yes no

Have you worked for this company before?

yes no If yes, please list the position: _____

REFERENCES: Please, list two work related references

	NAME	PHONE NUMBER	YEARS KNOWN
1	_____	_____	_____
2	_____	_____	_____

Agreement and understanding of the applicant

I agree to give permission to Furmano Foods to inquire into my past employment concerning my attendance behavior, performance, duties and responsibilities. I also give the above reference and previous employer's permission to release the above stated information.

I understand that, if I am employed, my employment will be on a seasonal basis and that I will acquire no seniority rights or participate in any benefits program afforded to full time employees. I agree to abide by the policies and procedures of the company.

I certify that the above statements are true to the best of my knowledge and understanding, and that the making of false statements will be considered to be sufficient cause for discharge upon discovery thereof.

Please, sign below after you have read the above statement

Signature: _____

Date: _____

Interviewed By: _____

Date: _____



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