



# Employment Application

| APPLICANT INFORMATION   |                      |   |      |
|---|----------------------|---|------|
| Last Name   | First                | M.I.  | Date |
| Street Address  |                      | Apartment/Unit #  |      |
| City  | State                | ZIP   |      |
| Phone   | E-mail Address       |   |      |
| Date Available  | Position Applied For | Desired Salary  |      |
| Do you have any family members that work for Lil' Pantry? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, who? |                      |   |      |
| Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>                                |                      | If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/> |      |
| Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?                    |                      |   |      |

| EDUCATION   |    |  |        |
|-------------|----|--|--------|
| High School |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| College     |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |
| Other       |    | Address  |        |
| From        | To | Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/> | Degree |

| REFERENCES  |               |
|---|---------------|
| <i>Please list three professional or personal references.</i> |               |
| Full Name   | Relationship  |
| Company   | Phone (     ) |
| Address   |               |
| Full Name   | Relationship  |
| Company   | Phone (     ) |
| Address   |               |
| Full Name   | Relationship  |
| Company   | Phone (     ) |
| Address   |               |

**Mailing Address: 2035 NW Vine Street, Grants Pass, OR 97526**

| <b>PREVIOUS EMPLOYMENT (LIST MOST RECENT FIRST)</b>  |                 |                    |                  |
|--|-----------------|--------------------|------------------|
| Company  |                 | Phone (    )       |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From   | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |
| Company  |                 | Phone (    )       |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From   | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |
| Company  |                 | Phone (    )       |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From   | To              | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |

| <b>OTHER</b>   |     |                          |                             |
|--|-----|--------------------------|-----------------------------|
| Some jobs require that you lift 50 (fifty) pounds. Can you lift 50 lbs.? | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you have dependable transportation to work?                           | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |
| Do you have any objection to working nights, weekends, or holidays?      | YES | <input type="checkbox"/> | NO <input type="checkbox"/> |

| <b>DISCLAIMER AND SIGNATURE</b>  |      |
|--|------|
| <p><i>I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate release. By my signature below I certify that I am consenting to a thorough background check.</i></p> <p><i>I understand that LPLS, LLC and Lil' Pantry Markets are equal opportunity and drug-free employers.</i></p> |      |
| Signature  | Date |

***It is not necessary to call or come in to "check" on your application. If you are selected for an interview, you will be called.***