

An equal opportunity employer, Lusamerica Foods, Inc. does not discriminate in hiring or terms and conditions of employment because of an individual's age (40 and older), ancestry, color, religious creed (including religious dress and grooming practices), denial of family and medical care leave, disability (mental and physical), marital status, medical condition (cancer and genetic characteristics), genetic information, military and veteran status, national origin (including language use restrictions), race, sex (which includes pregnancy, childbirth, breastfeeding and related medical conditions), gender, gender identity, gender expression, sexual orientation, or any other basis protected by federal, state, or local law, ordinance or regulation.



Employment Application

Date of application: ____/____/____

Position desired: _____ Schedule desired: full-time part-time

Personal Information

Last Name	First Name	Middle Name
Present Street Address	City State Zip	How long have you lived there?
Mailing Address (if different from present address)	City State Zip	How long did you live there?
Cell Phone Number: Home or other numbers:	Are you at least 18 years old? <input type="checkbox"/> yes <input type="checkbox"/> no (if under 18 years old you will be required to provide authorization to work)	Are you authorized for employment in the United States of America? Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you able to perform the job's essential functions for which you are applying, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No If no describe the functions that cannot be performed.		

Education

Type of School	Name and Location of School	Degree	Last Year Completed (Circle one)	Graduated (Check one)
High School	Name City and State		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>
College	Name City and State		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other	Name City and State		1 2 3 4	Yes <input type="checkbox"/> No <input type="checkbox"/>

Additional Information

Is there any additional information involving a change of name or assumed name that will permit us to check your work record?			
Have you ever been employed by Lusamerica before? Yes <input type="checkbox"/> No <input type="checkbox"/>	Employment dates	Location(s)	Position held
List names of friends or relatives now or formerly employed by Lusamerica.			

Availability

	SUN	MON	TUES	WED	THURS	FRI	SAT	
AM								
PM								

Can you work overtime, weekends and holidays? Yes No

If hired would you have reliable means of transportation to and from work? Yes No

If hired what date can you start?

Employment History

List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. May we contact your current employer? Yes No

Dates	Name and address of employer	Position held	Reason for leaving	Work Performed
From:	Name	Job Title		
	Address			
To:	Phone	Supervisor		
From:	Name	Job Title		
	Address			
To:	Phone	Supervisor		
From:	Name	Job Title		
	Address			
To:	Phone	Supervisor		
From:	Name	Job Title		
	Address			
To:	Phone	Supervisor		

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or experience.

PLEASE READ THIS STATEMENT CAREFULLY

I understand that neither completing this application nor any other part of my consideration for employment establishes any obligation for Lusamerica to hire me. If I am hired, I understand that either Lusamerica or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Lusamerica has the authority to make any assurance to the contrary.

I attest with my signature below that I have given Lusamerica accurate and complete information on this application. No requested information has been concealed. If any information I have provided is untrue or concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

I have read and affirm as my own the above statements. _____

Applicant's signature

Date