

Application for Employment

AVI FOODSYSTEMS, Inc. subscribes without reservation to all federal, state and local statutes that prohibit discrimination in Employment because of race, creed, color, age, sex, sexual preference, religion, national origin, handicap, or veteran's status. Answers to information requested in this application will be evaluated solely for the purpose of determining your qualifications to perform the job for which you are applying.

AVI FOODSYSTEMS, Inc.

Instructions: Please print neatly. This application must be completed and signed personally, by the applicant. Each question must be answered in full. If "no" or "none" is used as an answer, please state. PLEASE USE INK.

Last Name _____ First _____ Middle _____

Former Name, If any _____

Social Security No. _____ Telephone No. _____ Length of time at present address _____

Present Address No. _____ Street _____ City _____ State _____ Zip _____ Country _____

Are you 18 years of age or older? Yes No If no, list your date of birth: _____

Position applied for: _____

Hourly Rate/Salary Expected (Be Specific): \$ _____

Are you willing to work: Mornings Days Nights Saturdays Sundays

Were you previously employed by AVI FOODSYSTEMS, Inc.? Yes No If yes, dates/location: _____

In the event of an emergency, who should be notified? NAME: _____ RELATIONSHIP: _____

PHONE: HOME: (_____) _____ WORK: (_____) _____ PLACE OF BUSINESS: _____

How did you happen to apply for this job? _____

List any friends and/or relatives working for AVI FOODSYSTEMS, Inc.

Name: _____ Relationship: _____

Have you been convicted of a crime within the past seven years, excluding minor traffic offences?

Yes No If yes, state the crime and describe what happened. (A criminal conviction will not disqualify you from consideration)

Employment History

Instructions: Please start with your most recent employer.

Please explain reason for periods of unemployment longer than three (3) months between Job #1 and present.

1. Employer	Employment dates:	Phone Number:	Reason for Leaving (Please give detail)
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Address	City	State	Title	Supervisor's Name
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Please explain reason for periods of unemployment longer than three (3) months between Job #1 and Job #2

2. Employer	Employment dates:	Phone Number	Reason for Leaving (Please give detail)
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Address	City	State	Title	Supervisor's Name
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May we contact your present employer? Yes No Not currently employed

Please submit form by email

Signature: _____

Date: _____

When Finished Click Submit