

FEEDING AMERICA WEST MICHIGAN

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

PERSONAL INFORMATION

Name _____
Last First Middle

Present Address _____
Street State Zip

Permanent Address _____
Street State Zip

Phone No. _____ Are you 18 years or older? Yes _____ No _____

Describe any U.S. Military Service: branch, rank, nature and date of discharge. _____

Are you presently in the United States armed forces, active or reserve? If so, identify unit and any service obligations _____

Have you ever been convicted of a crime or are you presently charged with a felony? If so, where and when, and explain circumstances. _____

EMPLOYMENT DESIRED

Position desired _____ Date you can start _____ Salary desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Have you ever applied to Feeding America West Michigan Food Bank before? _____

When? _____ Where? _____

Have you ever worked for Feeding America Food Bank West Michigan before? _____

When? _____ Where? _____

Relatives employed by the Food Bank? Yes _____ Who? _____ No _____

Do you have any activities, commitments or responsibilities (for example, school, other employment, etc.) that might interfere with you ability to work full-time, including overtime, in the position for which you are applying? If so, explain. _____

Applicants for part-time work provide the following information:

Please insert times on each day you would be available for work (the Company retains the right to schedule employees' work hours and alter schedules at will):

Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____ Sat: _____

Applicants for temporary work answer the following question:

For what period of time are you available to work? From: _____ to: _____
Date Date

If employed here, do you expect to work any other job? Yes _____ No _____

If yes, give nature of work and amount of time it requires _____

FORMER EMPLOYMENT-List below last four employers, starting with the most recent.

Date (Month & Year)	Name and Address of Employer	Reason for Leaving
From		
To		
From		
To		
From		
To		
From		
To		

Describe fully the nature of the work in your present (or most recent) job.

Which of your jobs did you like best? _____

Why? _____

What special skills or knowledge do you have that will aid you in qualifying for employment?

Education

	NAME AND LOCATION OF SCHOOL	NUMBER OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
Grammar School				
High School				
College				
Trade, Business or Correspondence School				
Subjects of Special Study Or Research Work				

References-Give the names of three persons, not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted

In case of emergency

Notify:

Name	Address	Phone No.

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

Hired: _____ Yes _____ No _____ Position _____ Dept. _____

Salary/Wage _____ Date Reporting to Work _____

Approved: 1. _____ 2. _____

I, the undersigned applicant for employment, understand and agree that all employment at Feeding America West Michigan Food Bank (the "Company") is on at-will basis, and may be terminated by the employee or the Company at any time for any cause or no cause. I understand and agree that no one employed by the Company (except the Company's Board of Directors by a written resolution authorizing a specific written contract for a specific term of years naming the employee and signed by the employee and with authority of the Directors) has any authority to offer employment other than on an at-will basis. I also understand and agree to the Company's policy that the Company's decisions on all employment related matters are final, and are not subject to review or appeal outside the Company except as required by laws providing or requiring employers to provide such specific employment standards and rights.

I certify that the facts contained in this application are true and complete and that any falsification, misrepresentation or omission herein may result in refusal of, or immediately termination from employment. I authorize and request my former employers, reference and educational institutions to give the Company any and all information and opinions about me in their possession; I hereby waive written notice of such release my former employers, references and educational institutions from any liability or claim relating to such release of information and opinions. I also authorize request federal, state and local governmental agencies to release to the Company any information requested concerning any criminal convictions on my record.

I agree that the contents of any lockers, desks or other Company property I may be using, and of my own property I bring onto the Company's premises (including without limitation cars, packages, and purses) may be inspected by the Company at any time, and I waive and promise not to make any claims against the Company (or its employees, owners, or agency) relating to such an inspection.

I agree to submit to physical examinations permitted by law performed by a health care professional before and during my employment at the request and expense of the Company, and I agree to disclose completely all information lawfully requested at such examinations about my physical condition and medical history. I also agree that before and during my employment, at the request and expense of the Company, I will cooperate in such lawful medical tests (including blood, urine, or other testing) as the Company requests to check for drugs or alcohol in my system, or for any other physical condition. I waive and release and promise not to make any claims against the Company (or any testing agency retained by it, or their employees, owners and agents) related to any such testing, or from lawful decisions made regarding my employment or termination of employment based upon the results of such testing or analysis.

I agree that, except as prohibited by statute, the Company may disclose any information or opinions related to me or my employment to employees of the Company or third parties, and I waive and release and promise not to make any claims against the Company (or its employees, owners, or agents) relating to any such disclosure.

I agree that, except as directed otherwise by the Company, I will not disclose to anyone or use for my own purpose, any of the company's confidential or proprietary information, either during or after my employment. I understand and agree that the Company's trade secrets, bidding, costs, pricing and marketing information and techniques, financial and market information, computer software, sources of supply and customer names and information are confidential and proprietary information of the Company; I also agree that I will not make written or other copies of notes regarding those matters except as necessary to perform my job, and I agree that if my employment with the Company ends, I will deliver to the Company all materials of any kind that I have relating to the Company, including any such copies or notes. I also agree that I will disclose and assign to the Company any invention, design or process relating to the Company's business which I develop or conceive while employed with the Company and that all such designs or conceptions shall be the property of the Company.

I agree that I will not commence any action or suit relating to my employment with the Company (or terminating of the employment) more than six (6) months after the date of the employment action that is the subject of the claim or lawsuit, and I agree to waive any statute of limitations to the contrary. I understand that this means that, even if the law would give me the right to wait a longer time to make a claim, I am waiving that right, and that any claims not brought within six (6) months after that date of employment action at issue are waived.

I agree to all the above terms of employment. I agree that if any of the above commitments by me is ever found to be legally unenforceable as written, the particular agreement, the particular agreement concerned shall be limited to allow its enforcement as far as legally possible and shall not effect the rest of this agreement. I understand and agree that no one other than the Board of Directors of the Company, by a written resolution authorizing a contract with a specific named individual, has any authority to modify or announce modification of the above terms of employment and policies, or to make any exception to them, or to offer employment on any other terms. I understand and agree that, except as provided above, all benefits, programs, rules and policies of the Company are subject to exceptions or change at will at any time as decided by the Company.

Smoking is not permitted anywhere in our office or in the building.

Date: _____ Signature of Applicant: _____

Printed Name: _____

AUTHORIZATION AND WAIVER

I authorize and request my former employers, references, educational institutions, and any credit agencies or reporting services that have information about me to give Feeding America West Michigan Food Bank any information and opinions about me in their possession and which may lawfully be disclosed. I hereby waive written notice of such release of information and opinions, and I release such former employers, references, educational institutions, and credit agencies or reporting services from any liability or claim relating to such release of information and opinions. I also authorize and request federal, state, and local governmental agencies to release to Feeding America West Michigan Food Bank any information requested concerning any criminal convictions on my record. A photocopy of the signed authorization and waiver will be valid as an original.

Date: _____ Signature of Applicant: _____

Print Name: _____

Notice

When you sign your application documents for employment with Feeding America West Michigan Food Bank, you agree that:

- Feeding America West Michigan Food Bank may obtain a consumer credit report about you in connection with your application for employment.
- If you become an employee of Feeding America West Michigan Food Bank, Feeding America West Michigan Food Bank may from time to time obtain a consumer credit report about you.

If your application is denied on the basis of information obtained in a consumer credit report, or if an adverse action is taken against you regarding your employment based on information contained in a consumer credit report, a copy of the report and a description of your rights under the Fair Credit Reporting Act will be provided to you.

This notice is provided under the Fair Credit Reporting Act.