

Application for Employment

Our Company fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, genetic information, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans with Disabilities Act and applicable state laws, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As an Equal Opportunity Employer, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. To the extent required by applicable law, the Company maintains a smoke-free workplace.

Personal Information

Name _____
Last First Middle

Current Address _____
Street

Current Address _____
City State ZIP Code

E-mail Address _____

Home Phone #(____) _____ Mobile Phone #(____) _____

Current employment status with the Company _____

How did you hear about us? _____

Did someone refer you to this Company? Yes No

If yes, please provide their name _____

Have you ever filed an application or been employed by Urner Barry? Yes No

If yes, please give date _____

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.) Yes No

Are you eligible to work in the U.S? (Proof of employment eligibility will be required, if hired.) Yes No

Will you now or in the future require sponsorship for employment visa status (e.g. H-1B visa status)? Yes No

Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

Availability

Available start date _____

Position desired _____

Hourly Rate/Salary desired _____

Type of employment desired Full-Time Part-Time Temporary Educational Internship

Will you relocate if the job requires it? Yes No

Will you travel if the job requires it? Yes No

If they have been explained to you, are you able to meet the attendance requirements of the position? Yes No

If applicable for the position, will you be able to work overtime if required? Yes No

If no, please explain

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Employment History

I do not have any employment history. *[Note: if you choose not to provide any employment history, the company may not be able to evaluate your fit for the position(s) for which you are applying.]*

Employer _____

Address _____

Telephone Number (____) _____

Immediate Supervisor and Title (for most recent position held) _____

Most Recent Position _____

Dates Employed from _____ to _____

Currently Employer

Job Duties _____

Reason for leaving _____

May we contact this reference? Yes No

Employment History (cont.)

Employer _____

Address _____

Telephone Number (____) _____

Immediate Supervisor and Title (for most recent position held) _____

Most Recent Position _____

Dates Employed from _____ to _____

Currently Employer

Job Duties _____

Reason for leaving _____

May we contact this reference? Yes No

Employer _____

Address _____

Telephone Number (____) _____

Immediate Supervisor and Title (for most recent position held) _____

Most Recent Position _____

Dates Employed from _____ to _____

Currently Employer

Job Duties _____

Reason for leaving _____

May we contact this reference? Yes No

Do you have additional employment history?

Education History

I do not have any education history. *[Note: if you choose not to provide any education history, the company may not be able to evaluate your fit for the position(s) for which you are applying.]*

Starting with your most recent school attended, please provide the following information:

Name of School _____

City _____ State/Province _____

Country _____

Telephone Number (____) _____

Years Attended from _____ to _____

Currently Enrolled

Major/Area of Study of Emphasis _____

Degree/Program _____

Degree was obtained Yes No

May we contact this reference? Yes No

Name of School _____

City _____ State/Province _____

Country _____

Telephone Number (____) _____

Years Attended from _____ to _____

Currently Enrolled

Major/Area of Study of Emphasis _____

Degree/Program _____

Degree was obtained Yes No

May we contact this reference? Yes No

Professional Skills and Certifications

I do not have any certifications/licenses. [Note: if you choose not to provide any education history, the company may not be able to evaluate your fit for the position(s) for which you are applying.]

Certification/License Type _____

Certification/License Number _____

Issuing Agency _____

City _____ State/Province _____

Country _____

Telephone Number (____) _____

Status _____

May we contact this reference? Yes No

Please list any other special skills you may have that may assist you in performing the position for which you are applying

References

I do not have any references. [Note: if you choose not to provide any education history, the company may not be able to evaluate your fit for the position(s) for which you are applying.]

Contact Name _____

Contact Title _____

Address _____

Telephone Number (____) _____

Email Address _____

In what capacity _____

How long have you known reference? _____

Contact Name _____

Contact Title _____

Address _____

Telephone Number _____

Email Address _____

In what capacity _____

How long have you known reference? _____

Contact Name _____

Contact Title _____

Address _____

Telephone Number _____

Email Address _____

In what capacity _____

How long have you known reference? _____

I understand that this application form is intended for use in evaluating my qualifications for employment and that this application is not an offer of employment. I further understand that if hired, my employment will be considered "at-will" and that my employment may be terminated for any reason, with or without cause or notice, at any time by me or the Company and that this application is not intended to constitute a contract of continued employment.

I certify that the information submitted by me on this application is true and complete. I understand that any false information, misrepresentations or omissions on this application, resume or on other written materials, provided during any interviews will lead to the rejection of my application or, if I am employed, discipline up to and including termination at the time such false information or omission is discovered.

I understand that additional testing of job-related skills and for the presence of drugs may be required prior to employment. I also understand that after an offer of employment and prior to reporting to work, I may be required to submit to a medical review and depending on Company policy and the needs of the job, I may be required to complete a medical history form and be examined by a medical professional designated by the company. I also understand that I may not be under the influence of drugs or alcohol during employment and that if Company policy so requires, I may be required to submit to drug and/or alcohol testing at an approved testing facility.

I understand that smoking is prohibited in all indoor areas of the Company's facilities unless designated smoking areas have been established at a particular location in accordance with applicable state and local law.

I authorize the Company and/or its agents, including consumer reporting agencies, to investigate and verify any of the information provided by me. I authorize my former employers, educational institutions, references and any relevant agencies to provide information to the Company and/or its agents concerning my background and experience. I release the Company and all parties providing information to the Company about my background and experience from any liability whatsoever arising therefrom.

First Name _____ Last Name _____

Signature _____ Date _____