



When Freshness Counts

An Equal Opportunity Employer

We Are Proud to be a Drug & Alcohol Free Workplace

### Request for Employment Application

\*\*\*\*\*

Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Name: \_\_\_\_\_

Last

First

Full Middle Name

Physical Address: \_\_\_\_\_

Number & Street

City

State

Zip

How Long?

Telephone Number: ( \_\_\_\_\_ ) \_\_\_\_\_ Message Telephone: ( \_\_\_\_\_ ) \_\_\_\_\_

Can you provide documentation that you are eligible to work in the United States? YES [ ] NO [ ]

\*\*\*\*\*

#### Employment Desired:

Position: \_\_\_\_\_ Date Available: \_\_\_\_\_ Desired Wage: \_\_\_\_\_

( ) Full-Time ( ) Part-Time Specify Hours/Days \_\_\_\_\_

\*\*\*\*\*

Education:	Name & Location of School	Subject(s) Studied	Graduated? [ ] YES [ ] NO
High School:	_____	_____	_____
College:	_____	_____	_____

Special Training: \_\_\_\_\_

#### Office Equipment:

Computer: \_\_\_\_\_ Typing WPM: \_\_\_\_\_ 10 Key SPM: \_\_\_\_\_

Other: \_\_\_\_\_

\*\*\*\*\*

Reliable Transportation To Work? [ ] YES [ ] NO Vehicle YR: \_\_\_\_\_ Make: \_\_\_\_\_

#### Driver's License

STATE \_\_\_\_\_ NUMBER \_\_\_\_\_ CLASS: A, B, or C \_\_\_\_\_ FULL EXPIRATION DATE \_\_\_\_\_

\_\_\_\_\_

**THIS IS NOT AN APPLICATION FOR EMPLOYMENT**

(NOTE: List Employers in reverse order, beginning with most recent )

MOST RECENT EMPLOYER			DATES		POSITION HELD
NAME			FROM		REASON FOR LEAVING
ADDRESS			MO	YR	
CITY STATE ZIP			TO		
PHONE NUMBER			MO	YR	
EMPLOYER					
EMPLOYER			DATES		POSITION HELD
NAME			FROM		REASON FOR LEAVING
ADDRESS			MO	YR	
CITY STATE ZIP			TO		
PHONE NUMBER			MO	YR	
EMPLOYER					
EMPLOYER			DATES		POSITION HELD
NAME			FROM		REASON FOR LEAVING
ADDRESS			MO	YR	
CITY STATE ZIP			TO		
PHONE NUMBER			MO	YR	
EMPLOYER					
EMPLOYER			DATES		POSITION HELD
NAME			FROM		REASON FOR LEAVING
ADDRESS			MO	YR	
CITY STATE ZIP			TO		
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NAME			FROM		REASON FOR LEAVING
ADDRESS			MO	YR	
CITY STATE ZIP			TO		
PHONE NUMBER			MO	YR	



**Whereas ProPacific Fresh Policy Is To Provide A Drug & Alcohol Free Workplace, Have You:**

BEEN DENIED EMPLOYMENT WITHIN THE PAST THREE YEARS BASED ON A POSITIVE ALCOHOL OR ILLEGAL SUBSTANCE (DRUG) TEST?

YES       NO

TESTED POSITIVE FOR ANY ILLEGAL SUBSTANCE WITHIN THE PAST THREE YEARS?

YES       NO

HAD A DRUG TEST RESULT REPORTED VERIFIED AS ADULTERATED, DILUTED OR SUBSTITUTED WITHIN THE PAST THREE YEARS?

YES       NO

REFUSED ANY REQUIRED DRUG OR ALCOHOL TEST WITHIN THE PAST THREE YEARS?

YES       NO

IF YOU ANSWERED "YES" TO ANY OF THE ABOVE, YOU MUST PROVIDE VALID DOCUMENTATION THAT YOU HAVE BEEN EVALUATED BY A SUBSTANCE ABUSE PROFESSIONAL (SAP) AND HAVE TESTED NEGATIVE.

ARE YOU CURRENTLY USING ANY ILLEGAL SUBSTANCE?

YES       NO

WITHIN THE PAST THREE (3) YEARS, HAVE YOU BEEN CONVICTED OF A DUI, WET RECKLESS, RECKLESS DRIVING, OR A FATALITY AT-FAULT VEHICLE COLLISION?

YES       NO

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**ILLEGAL SUBSTANCES DEFINED:**

MARIJUANA (THC)  
COCAINE  
OPIATES - HEROIN  
PHENCYCLIDINE (PCP)  
AMPHETAMINES (Including Methamphetamines)  
and derivatives thereof.