





# PERSONAL INFORMATION

Date of Application:		_	
Last Name:			
First Name:		MI:	
Home Phone:	Alter	mate Phone:	
Street Address:			
City:	_State:	Zip Code:	
Mailing Address:			
City:	State:	Zip Code:	
Are you under the age of 18? Yes_ (If under 18, you will have to provid			No

If hired can you provide proof of eligibility to work in the U.S. prior to your start date?

	YesNo	
Emergency contact:		
		Phone:
EDUCATION		
High School Name and I	Location:	
Did you graduate? Yes	√oGED	No. of years attended:
College Name and Loca	tion:	
	No	No. of years attended:
Did you graduate? Yes	NU	

# Date available for employment:

-	 		

Position (s) Desired: Wage Desired: <u>\$</u>

Hours Desired per week:

/hr. (Please note: Wage and hours scheduled are at the discretion of management)

# When can you work?

	MON.	TUES.	WED.	THURS.	FRI.	SAT.	SUN.
EARLIEST TIME							
LATEST TIME							

То

Are you seeking seasonal employment? Yes \_\_\_\_\_No\_\_\_\_\_

If yes, for how long? From
----------------------------

Do you have any special time off already planned? Yes\_\_\_\_No\_\_\_\_

If yes, when?:

# **MISCELLANEOUS**

If yes, dates: From	To
Location:	
Immediate Supervisor:	
Reason for leaving:	
What are your 3 main reaso	ons for choosing Wayne's for prospective employmen
1	
2	
3	
Please summarize any speci or other experience:	ial skills and qualifications acquired from employme
	all the essential functions (either with or without ob for which you are applying? YesNo
If hired, do you agree to abid	le by the safety rules of the company? YesNo
for which you were convicted	a felony or released from prison/jail, as a result of a crin d (felony or misdemeanor) within the last 10 years? (Not disqualify you from employment.) Yes <u>No</u>
If yes, please explain, ind	licating the charge, place and action taken:
REFERENCES	
Please do not use family	members.
Name:	
Phone No	Years known:
Name:	
Ivanie	

## WORK HISTORY

Have you ever worked before? Yes\_\_\_\_No\_\_\_\_

If you worked under a different name, please indicate:

Begin with your most recent employer and account for your last three jobs for the last 7 years, whichever is shorter:

1. Employer's Name	
	State:Zip Code:
Phone No.:	Rate of pay:
Dates of employment: Fro	m To
Full TimePart Time	Immediate Supervisor:
Position:	
2. Employer's Name	
	State:Zip Code:
Phone No.:	Rate of pay:
Dates of employment: Fro	m To
Full TimePart Time	Immediate Supervisor:
Position:	
3. Employer's Name	
	State:Zip Code:
Phone No.:	Rate of pay:
Dates of employment: Fro	m To
Full TimePart Time	Immediate Supervisor:
Position:	
Reason for leaving:	
May we contact the employ	yers listed above? Yes No
	hich one (s) you do not wish us to contact:
	n to contact your <u>current</u> employer? Yes <u>No</u>
· · · ·	
Would you agree to a physical example.	mination paid for by the company if requested? Yes No

Fill out this form and email it to: Danbury@waynesfoodsplus.com or print out and mail to:

Waynes Foods Plus 7413 Main St. Danbury, WI 54830

### **EMPLOYMENT TEST**

Part 1	- No	calcul	lators	please

.89		
.79		
3.39	10.00	35.25
+2.79	<u>-4.59</u>	<u>-33.08</u>

#### Part 2

1. Which do you consider more important as far as Wayne's/Sun Travel/ Quiznos is concerned?

a. courteous, prompt service or b. quality products

2. You are working alone and your shift is due to be over at 6 p.m. The individual who is scheduled to begin working at 6 p.m. does not show up. What do you do?

3. What do you consider to be the most important qualifications of a Wayne's/Sun Travel/Quiznos employee?

#### STATEMENT

This application of employment is not intended to be a contract of employment. Applications will be kept on file for 30 days. After 30 days, you will need to fill out a new application if you still want to be considered for a position.

#### **\*\*DRUG TESTING NOTICE:\*\***

This notice is to inform you that Wayne's promotes a drug free work environment. If a job offer is extended to you, you may be required to submit to and pass a drug and/or alcohol test for the use of illegal substances prior to being hired. Additionally, a drug test may be required following a work related injury.

We are an equal employment opportunity company. Wayne's Star of the North Markets, Inc. complies with all applicable employment discrimination laws, including those that prohibit discrimination on the basis of age, race, color, national origin, sex (including pregnancy), religious beliefs, disability, sexual orientation, citizenship status, military status, or any other basis protected by federal, state or local fair employment practice laws.

In consideration of my employment, I agree to conform to the rules and regulations of this company, whether outlined verbally or in the employee handbook. My employment and compensation can be terminated at will, with or without cause, with or without notice, at any time, at the option of either myself or the company.

All of the information on this application and made in conjunction with this application is correct and true to the best of my knowledge. I understand that any false or misleading statements made by me in connection with this application or the failure to disclose any material information will be grounds for immediate dismissal. Wayne's may investigate the information provided on my application. I hereby release my previous employers and other persons from all claims and liabilities for furnishing information in connection with this investigation.

Signature of Applicant

Date