

**INGOMAR PACKING CO., LLC
APPLICATION FOR EMPLOYMENT**

PERSONAL INFORMATION:

Date: _____

Name: _____
Last
First
Middle

Social Security Number: _____ Phone Number: _____

Referred By: _____

All Names Used In The Past:

Last First Middle

Present Address: _____
Street
City
State
Zip

State Name of Any Friends or Relatives Working For Ingomar Packing Co.:

EMPLOYMENT DESIRED:

Position: _____ Date You Can Start: _____

Expected Rate of Pay? _____ Are You Employed Now? _____

If So, May We Contact Your Present Employer? _____

Have You Ever Worked for this Company? _____ If So, When? _____

Have You Ever Applied to this Company? _____ If So, When? _____

Are you available to work: Full-Time Seasonal Part-Time

EDUCATION AND SKILLS:

	Elementary School	High School	Undergraduate College/University	Graduate/ Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				

Describe any specialized training, apprenticeship, or activities that are relevant to the job for which you are applying	
Describe any honors, appointments or awards you have received	
List professional, trade, business or civil activities and offices held	

Indicate any foreign languages you can speak, read and/or write			
	Fluent	Good	Fair
SPEAK			
READ			
WRITE			

U.S. Military or Naval Service? No Yes Rank: _____

Citations/Awards: _____

List any job-related skills that you learned while in the U.S. Military or Naval Service:

Driver's License Information:

State: _____ Number: _____ Expiration Date: _____

Restrictions or Suspensions (respond fully if driving is required by the job for which you are applying):

Have you entered into any agreements with any former employer (for example, an agreement not to compete or confidentiality agreement) that may impact your ability to work for the Company?

No Yes

Are you over 18 years of age? No Yes

California applicants: Do not answer "Yes" to the following two questions if the only reason for doing so is either:

- (a) a conviction under: Health & Safety Code sections 11357(b) or (c), 11360(b) (formerly section 11360(c)), 11364, 11365, or 11550, or their statutory predecessors, which related to marijuana convictions that occurred two or more years ago; or
- (b) if the conviction or plea resulted in participation in a pre-trial or post-trial diversion program.

Note: A "Yes" answer will not necessarily disqualify you from employment. Please explain any "Yes" answer so that individual circumstances can be considered. Use additional paper if necessary.

Have you ever been convicted of a crime? Yes No

Are you currently awaiting trial for any criminal offense? (other than for possession of less than one ounce of marijuana more than two years ago) Yes No

Have you ever initiated an act of violence in the workplace? Yes No

Have you used illegal drugs within the past three (3) weeks? No Yes

If yes, which illegal drugs did you use and When? _____

Are you able to perform the duties of the position for which you are applying, including regular attendance?

No Yes

FORMER EMPLOYERS:

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
2. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				
3. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	

Reason for Leaving

Explain any gaps in your employment history. (Do not provide information about any physical or mental disabilities or other medical information.) _____

REFERENCES:

List three non-employment references who are not related to you, and have known you for at least one year.

	Name	Address	Telephone Number	Years Acquainted
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

In Case of Emergency Notify: _____

	Name
_____	_____
_____	_____
_____	_____

- I understand and acknowledge the following:
1. I understand that I am entitled to copies of any public records obtained directly by the Company in connection with my application for employment. Check one:
I waive do not waive my right to receive copies of public records obtained directly by the Company.
 2. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.
 3. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when discovered to be false or omitted, may result in my immediate dismissal.
 4. I understand that I will be required to possess a current and valid California driver's license if my job requires me to drive in the course of my work.
 5. I agree that, if I am offered a position, it will be offered on condition that my employment shall be at will and for no definite period, and that my employment may be terminated at any time with or without cause and with or without prior notice. I understand that, except for the President of the Ingomar Packing Co., no supervisor or manager may alter or amend the above conditions. Only the President of the Company has authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.
 6. I understand and agree that, if I am offered a position, it will be a conditional offer based on my successful passing of both a drug and alcohol screen and job related medical examination.
 7. I understand and agree that as a condition of my employment I may be required to undergo a medical examination.
 8. I understand and agree that as a condition of my employment, I may be required to undergo drug testing, and any other testing to the extent permitted by applicable laws.
 9. I agree that I will settle any and all previously unasserted claims, disputes, or controversies arising out of or relating to my employment, my application or candidacy for employment, and/or cessation of employment with Ingomar Packing Co., exclusively by final and binding arbitration before a neutral Arbitrator (pursuant to the Company's Alternative Dispute Resolution Policy). By way of example only, such claims include claims under federal, state, and local statutory law, such as the Fair Employment and Housing Act, Age Discrimination in Employment Act, Title VII of the Civil Rights Act of 1964, as amended, including the amendments of the Civil Rights Act of 1991, the Americans With Disabilities Act, the law of contract and the law of tort.
 10. If I am offered employment, I will, as a condition of employment furnish proof that I am over 18 years of age.
 11. I agree that, if I am offered employment, I will be required to conform to the rules and regulations of the Company.
 12. I authorize investigation of all statements contained in this application and any supporting documents. I authorize the Company to secure information about my experience from former employers, educational institutions, government agencies, or any references I have provided, and for those parties to provide information concerning my experience and I hereby release all parties from any liability arising from such investigation.

Date: _____

Signature

An Equal Opportunity Employer