



Southwest Foodservice Excellence, LLC Employment Application

An Equal Opportunity Employer

"Putting Child Nutrition First"

Southwest Foodservice Excellence, LLC is an equal opportunity employer. We do not discriminate on the basis of sex, race, color, religious creed, national origin, age, disability, marital status, or any other characteristic protected by federal, state or local law. Southwest Foodservice Excellence, LLC will make a reasonable accommodation to known physical or mental limitations of qualified applicant or employee with a disability unless the accommodation will impose an undue hardship on the operation of our business.

PLEASE NOTE: The fact that you have been asked to complete this detailed application indicates our interest in your qualifications. You can aid in making a fair appraisal of those qualifications by answering each question as accurately as possible. Please examine the form before filling it out.

PERSONAL DATA

NAME	LAST	FIRST	MI	SOCIAL SECURITY NO.	
ADDRESS (Number & Street)		CITY	STATE	ZIP	TELEPHONE
Position Applying For		Date Available To Start		Salary Desired:	

How, or by whom, were you referred to this company?

Are you either a United States citizen or an alien who has the legal right to work in the job for which you are applying? YES NO
Pursuant to the Immigration Reform and Control Act of 1986, all applicants, upon being made an offer of employment, must produce documents which are specified by the federal government, establishing their identity and authorization for employment in the United States. These documents must be produced before commencement of employment. You will also be required to sign Form I-9 (issued by the federal government) verifying, under oath, your employment authorization.

If under 18 years of age, do you have a work permit? YES NO

Except for those records which have been ordered sealed or erased by the court, have you ever been convicted of a felony? YES NO
If yes, explain and give the date of conviction, reason and current disposition of the case (a conviction will not necessarily disqualify you from employment)

Explain:

Have you ever worked for this company before? YES NO

EDUCATION AND TRAINING

Type of School	Name	City, State	Last Grade Completed	Degree Granted	Kind of Course, Major Subjects Honors Received Outline as completely as possible
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High School

College

Graduate School

Other Training

List other qualifications and skills (i.e. languages, typing, office machines, etc.)

List professional licenses

License No.	Type of license	Place of Issue	Expiration Date
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Please list job-related organizations, clubs professional societies, or other associations to which you belong (omit those which may indicate your race, religious creed, color, national origin, ancestry, sex or age).

MILITARY (UNITED STATES)

Have you served in the Armed Services in the United States? YES NO

If yes, did you acquire any job related skills during your military service?

PROFESSIONAL REFERENCES

Please provide three (3) professional references of individuals familiar with your work history.

NAME	OCCUPATION	HOW LONG KNOWN?	PHONE

EMPLOYMENT RECORD IN THE UNITED STATES

Please complete in detail, starting with present employer. Account for all time, including periods of unemployment or self-employment. Feel free to attach resume, but please *complete this page in any case.*

EMPLOYER	MONTH/YEAR EMPLOYED	YOUR POSITION TITLE
ADDRESS	CITY/STATE/ZIP	
NAME OF SUPERVISOR	SUPERVISOR PHONE	
REASON FOR LEAVING		FINAL WAGE:
May we contact? _____		

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ADDRESS	CITY/STATE/ZIP	
NAME OF SUPERVISOR	SUPERVISOR PHONE	
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NAME OF SUPERVISOR	SUPERVISOR PHONE	
REASON FOR LEAVING		FINAL WAGE:
May we contact? _____		

READ CAREFULLY BEFORE SIGNING

I certify that the information contained in this Application and other required documents ("Application") are true and accurate to the best of my knowledge. I understand that any misrepresentations or omissions of such information or any false statements made by me in this Application shall result in denial of employment or discharge. I further understand that any offer of employment and continued employment is contingent upon my ability to provide documentation evidencing citizenship or right to work status.

I grant the Company permission to check any of the information submitted by me in connection with this Application and to make a thorough investigation of my past employment, education and activities. I authorize the employers and references listed in this Application or other required documents, unless otherwise indicated, to give the Company any and all information concerning my previous employment and other pertinent information they may have, personal or otherwise. I release the Company and all persons or entities supplying such information to the Company from all liability for any damage which may result from furnishing information to the Company.

I understand that a consumer report concerning my credit worthiness and credit rating (if job-related), character, general reputation, personal characteristics and mode of living may be requested by Southwest Foodservice Excellence, LLC in connection with my employment or post-employment activities. I understand that I will be notified if such a report is obtained. I further understand that, upon written request, I may obtain additional information about this report under the requirements of the Fair Credit Reporting Act.

I understand that employment is contingent upon satisfactory completion of reference checks and that, upon my written request, information on the nature and scope of an inquiry, if one is made, will be provided to me. **I understand this is a preliminary application and not a contract to employee me.**

I understand that it Southwest Foodservice Excellence, LLC policy to not to allow relatives to work in the same department where such employment poses problems of supervision, safety, security or morale, or poses potential conflicts of interest or other hazards greater for relatives than for other persons.

I agree to wear or use all protective clothing or devices required by the facility and to comply with all safety policies and procedures.

If an employment relationship is established, I agree to conform to the Company's policies and practices and that my employment and compensation can be terminated at any time with or without cause, and with or without advance notice, at the option of the Company or myself. I understand that no management representative has authority to enter into any agreement of employment for any specific period of time or to make any agreement contrary to the foregoing. I recognize and agree that the Company may exercise its right without prior warning or notice to conduct inspections of its property including but not limited to files, lockers, desks and vehicles, and in certain circumstances any personal property.

Signature of Applicant _____ Date _____