

Woodman's Employment Application

PLEASE PRINT OR TYPE ALL INFORMATION

LAST NAME	FIRST NAME	MIDDLE NAME
APPLICATION FOR POSITION OF:	TODAY'S DATE	DATE AVAILABLE
WHAT SHIFT ARE YOU AVAILABLE TO WORK <input type="checkbox"/> 1ST OR 2ND SHIFT FULL TIME <input type="checkbox"/> 3RD SHIFT FULL TIME <input type="checkbox"/> NIGHTS & WEEKENDS <input type="checkbox"/> WEEKENDS ONLY		
<input type="checkbox"/> OTHER - PLEASE EXPLAIN:		
PRESENT ADDRESS – Street, City, State & Zip Code:		PHONE NUMBER – Include Area Code
MAILING ADDRESS – If Different From Above:		
PROVIDE ANY DIFFERENT NAMES YOU HAVE UTILIZED SINCE AGE 18.		

Do You Have A Reliable Source Of Transportation To And From Work? YES NO
 Do You Have A Valid Drivers License? (Applicable only for certain positions) YES NO
 Are You At Least 18 Years Of Age? YES NO
 Are You Legally Eligible To Work in the United States? YES NO

EDUCATION & TRAINING					
Circle Highest Grade Or Year Completed In School 1 2 3 4 5 6 7 8 9 10 11 12	DO YOU HAVE A HIGH SCHOOL DIPLOMA OR A GED EQUIVALENCY? <input type="checkbox"/> YES <input type="checkbox"/> NO	NAME AND LOCATION OF HIGH SCHOOL			
TRAINING BEYOND HIGH SCHOOL (College, University or Other Schools)					
SCHOOL NAME & LOCATION	NUMBER OF YEARS ATTENDED	CREDITS EARNED	MAJOR FIELD	GPA / BASIS	DEGREE EARNED
DESCRIBE ANY OTHER EDUCATION OR TRAINING WHICH YOU FEEL IS RELEVANT TO THE JOB(S) FOR WHICH YOU ARE APPLYING. ALSO INCLUDE RELEVANT LICENSES & CERTIFICATIONS. BE SPECIFIC.					

The essential functions of most jobs at Woodman's will require that employees lift up to 50 lbs. frequently, bend and stoop frequently, push carts frequently, stand and/or walk long periods of time, some climbing, and work in extreme temperatures. To the extent these functions may be applicable to the position for which you are applying, can you perform all of the above functions or perform all of the above functions with reasonable accommodation? YES NO

Answering "NO" to this inquiry is not an automatic bar to employment. Woodman's is an equal opportunity employer and complies with all facets of the American with Disabilities Act (and any applicable state laws).

Do you have any pending criminal charges against you? YES NO

Have you ever been convicted of a crime, regardless of whether it was a felony or misdemeanor? YES NO

If you answered yes to either criminal background inquiries above, provide the date and county of the pending charge or conviction, the type of charge or conviction, and an explanation. (A pending charge or prior conviction will not automatically bar you from employment.)

Prior Military Service YES NO

Branch: _____ Years: _____

Rank at Discharge: _____

Were you Honorably Discharged? YES NO

If no, explain: _____