



# Second Harvest Food Bank of Northwest North Carolina Application for Employment

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including marital status, race, color, age, sex, sexual orientation, religion, disability, national origin or veteran status.

Date / /

## Employment Desired

Position	Date You Can Start	Salary Desired	Type of Employment Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Summer <input type="checkbox"/> Temporary <input type="checkbox"/>
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Are you employed now? YES  NO  If so may we contact your present employer? YES  NO

Have you ever applied to this company before? YES <input type="checkbox"/> NO <input type="checkbox"/>	Where?	When?
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## Personal Information

Last Name	First Name	Middle Name	Date of Birth
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Address (number, Street, City, State, Zip Code)

Previous Address if Less than 5 Years

Social Security Number	Home Telephone Number	E-Mail address	Referred By
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Have you been convicted of any offense in a criminal or military court? (Excluding traffic violations)  
Conviction is not an automatic disqualification from employment. Yes  No  If yes, please list.

Date	Place	Charge	Disposition
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Are you permitted to work in the U.S. at a full time job without restrictions? YES  NO  If no, please explain.

## Education

High School Attended and Location	No. of Years Completed	Did you graduate Yes <input type="checkbox"/> No <input type="checkbox"/>	
College Attended and Location	No. of Years Completed	Did you graduate Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree
Trade, Business or Correspondence School Attended and Location	No. of Years Completed	Did you graduate Yes <input type="checkbox"/> No <input type="checkbox"/>	

## General

Special Courses or Training:

Experience/Skills Related to the Position for Which You Are Applying:

## Employment History (List Present or Most Recent Positions First)

Name of Employer	Address (Number, Street, City, State, Zip Code)
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Phone	Type of Business	Department	Your Position
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Duties

Name and Position of Immediate Supervisor:

Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
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Reason for Leaving

Name of Employer

Address (Number, Street, City, State, Zip Code)

Phone	Type of Business	Department	Your Position
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Duties

Name and Position of Immediate Supervisor

Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
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Reason for Leaving

Name of Employer	Address (Number, Street, City, State, Zip Code)
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Phone	Type of Business	Department	Your Position
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Duties

Name and Position of Immediate Supervisor

Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
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Reason for Leaving

State any additional information you feel may be helpful to us in considering your application:

Have you ever been discharged or forced to resign?

## Other Experience

In this section, list any job experience not listed above that most directly relates to the job for which you are now applying.

Name of Employer	Address (Number, Street, City, State, Zip Code)
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Phone	Type of Business	Department	Your Position
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Duties

Name and Position of Immediate Supervisor

Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
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Reason for Leaving

For positions requiring driving of organization vehicles: Is your license restricted? Yes  No  If yes, Why?

Current valid driver's license number: \_\_\_\_\_

**By signing this document I am giving the Second Harvest Food Bank of Northwest North Carolina the authority to conduct a background check. I certify that the information provided is true and correct. I understand that any misleading or incorrect statements or the incomplete filling out of this application will be considered cause for denial of employment or immediate discharge.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**Mail to:**  
 Second Harvest Food Bank of Northwest NC  
 3655 Reed Street, Winston-Salem, NC 27107  
**Fax to:** 336.784.7369