



EQUAL OPPORTUNITY EMPLOYER APPLICATION

PERSONAL:						
LAST NAME:	FIRST:	MI:	TODAY'S DATE (MM/DD/YYYY) :			
ADDRESS: (Where your W-2 will be sent)			CITY:	STATE:	ZIP CODE:	Are you 18 or older? <input type="checkbox"/> YES <input type="checkbox"/> NO
BEST CONTACT PHONE NUMBER:			EMAIL ADDRESS:			
<i>Given the following descriptions, circle 3 that best describe you:</i> talkative, quiet, fun, smiley, laid-back, responsible, detail oriented, friendly, likes variety, enjoy outdoors, direct, respectful, serious, meticulous, busy, likes consistency, thoughtful, playful, gentle.						
Do you feel comfortable working with electric tools? (Chainsaw, Drill, etc.)						
Are you physically capable and comfortable lifting and maneuvering 50-80 lbs.?						
Can you submit proof of legal employment authorization and identity? <input type="checkbox"/> YES <input type="checkbox"/> NO <small>Proof of citizenship or immigration status will be required upon employment.</small>						
POSITION:						
Pumpkin Season (What position are you applying for?)			Christmas Tree Season			
<input type="checkbox"/> Part Time	<input type="checkbox"/> General Labor	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Time	<input type="checkbox"/> Tree Prep (Cut, Drill, & Stand - Must be 18+)		
<input type="checkbox"/> Full Time	<input type="checkbox"/> Cashier	<input type="checkbox"/> Food Sales	<input type="checkbox"/> Full Time	<input type="checkbox"/> Lot Setup/Takedown	<input type="checkbox"/> Truck Unloading (Tree Loads)	
	<input type="checkbox"/> Team Member	<input type="checkbox"/> Security		<input type="checkbox"/> Tree Handler/Sales		
AVAILABILITY:						
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Are there any future days you need to request off?			Date you are available to start work:			
EDUCATION:						
Name of High School:	City:	Zipcode	State:	Graduate? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Name of School:	City:	Zipcode	State:	Graduate? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Name of School:	City:	Zipcode	State:	Graduate? <input type="checkbox"/> YES <input type="checkbox"/> NO		

WORK HISTORY:			
1.) Current or most recent employer:	Manager/ Supervisor:	Phone Number:	
Address:	City:	State:	Zipcode:
What was your job title?		Start date and end date of employment: <small>(MM/DD/YYYY) – (MM/DD/YYYY)</small>	
Why did you leave?		If this is your current employer, may we contact them? <input type="checkbox"/> YES <input type="checkbox"/> NO	
2.) Previous employer:	Manager/ Supervisor:	Phone Number:	
Address:	City:	State:	Zipcode:
What was your job title?		Start date and end date of employment: <small>(MM/YYYY) – (MM/YYYY)</small>	
Why did you leave?		May we contact this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO	
REFERENCES:			
PLEASE LIST TWO (NON- FAMILY AND NON-EMPLOYER) PERSONAL REFERENCES			
First and last name:	Relationship to you:	Phone number:	
How long have you known this person?		Type of reference: <input type="checkbox"/> School <input type="checkbox"/> Personal <input type="checkbox"/> Work	
First and last name:	Relationship to you:	Phone number:	
How long have you known this person?		Type of reference: <input type="checkbox"/> School <input type="checkbox"/> Personal <input type="checkbox"/> Work	
EMERGENCY CONTACTS:			
First and last name:	Relationship to you:	Phone number:	
First and last name:	Relationship to you:	Phone number:	
AGREEMENT (PLEASE READ, SIGN, AND DATE BELOW)			
<p>Nature of my employment: If I am hired by Brookshire Farms, I agree that I will be an at-will employee, which means that either I or Brookshire Farms may end my employment at any time, without cause or notice. I agree that no written materials or verbal statements by Brookshire Farms will constitute an expressed or implied contract of continued employment and that this at-will relationship can only be modified in writing by Brookshire Farm. I agree that if hired, I will comply with Brookshire Farm rules, including treating confidentially any information I learn during my employment.</p> <p>My participation in Brookshire Farms DRUG FREE environment: I am not a current user of illegal drugs and I agree I will never work under the influence of drugs or alcohol.</p> <p><i>I understand that Brookshire Farms policy prohibits an employee under the influence of intoxicants or controlled substances from working, and that testing may be required of an employee, reasonably suspected to be under the influence, or who is involved in or who contributed to an accident involving injury or harm to individuals, property or equipment (except where prohibited by law.)</i></p> <p>My records and references: There is nothing in my background that would cause a risk to Brookshire Farms customers, employees, or property. I authorize Brookshire Farms to conduct reference checks, criminal and driving records checks, and other consumer report investigations. I release all parties from any Liability from providing such information to Brookshire Farms in this regard. I understand that past conviction of a crime will not necessarily disqualify me from consideration for employment. I understand that the nature and date of the offense and the relevance of the offense to the positions applied for will determine my eligibility for employment.</p> <p>Information certificate: I certify that the information I have provided to Brookshire Farms is true and correct. I agree to notify Brookshire Farms immediately if I am later charged with any of the crimes listed above or with a driving offense. I agree that any information or omission allows Brookshire Farm to refuse to hire me, or to terminate my eligibility for employment.</p> <p>Agreement to arbitrate: Since the delay of the court system, Brookshire Farms and I agree to use confidential binding arbitration, instead of going to court, for any claims that arise between me and Brookshire Farm, it's related companies, and/ or their current or Former employees. Without limitations, such claims would include any concerning compensation, employment (including, but not limited to, any claims concerning sexual harassment or discrimination), or termination of employment. Before arbitration, I agree (1): to present any such claims in full written detail to Brookshire Farms. (2): I agree to complete any Brookshire Farm review processes. (3): I agree to complete any external administrative remedy (such as with the Equal Employment Opportunity Commission). In any arbitration, the prevailing employment dispute resolution rules of the American Arbitration Association will apply, except that Brookshire Farms will pay the arbitrator's fee, and Brookshire Farms will pay the portion of the arbitration filing fee in excess of the similar court filing fee if I had gone to court.</p> <p>Signing your name below means that you understand and agree to all above statements, and the information you have provided is true and correct.</p>			
Applicant's signature _____		Today's Date _____	