

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION

			DATE
			SOCIAL SECURITY NUMBER
NAME			
LAST	FIRST	MIDDLE	
PRESENT ADDRESS			
STREET	CITY	STATE	ZIP
PERMANENT ADDRESS			
STREET	CITY	STATE	ZIP
PHONE NO.	ARE YOU 18 YEARS OR OLDER?		YES <input type="checkbox"/> NO <input type="checkbox"/>
ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION?			YES <input type="checkbox"/> NO <input type="checkbox"/>

LAST

FIRST

MIDDLE

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW?	YES <input type="checkbox"/> NO <input type="checkbox"/>	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?
HAVE YOU EVER WORKED FOR THIS COMPANY (MEXICAN VILLA FOOD PRODUCTS, INC.)?		
	WHERE?	WHEN?
REFERRED BY		

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL				

GENERAL INFORMATION

In compliance with Title 11-Dept. of Public Safety, Division 70-Division of Liquor Control, Chapter 2, Regulation No.70-2.140, this company is required to obtain the following information:

HAVE YOU EVER BEEN CONVICTED OF A FELONY? YES NO

IS IT RELATED TO THE MANUFACTURE OR SELL OF INTOXICATING LIQUOR? YES NO

SPECIAL ACTIVITIES, SKILLS, ACCOMPLISHMENTS:

EXCLUDE ORGANIZATIONS, THE NAME OF WHICH INDICATES THE RACE, CREED, SEX, AGE, MARITAL STATUS, COLOR OR NATION OF ORIGIN OF ITS MEMBERS.

U.S. MILITARY OR NAVAL SERVICE	RANK	PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESERVES
--------------------------------	------	--------------------------------------------------

(CONTINUED ON OTHER SIDE)

FORMER EMPLOYERS (LIST BELOW YOUR **LAST THREE** EMPLOYERS, STARTING WITH THE LAST ONE FIRST)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				

WHICH ONE OF THESE JOBS DID YOU LIKE THE BEST?

WHAT DID YOU LIKE MOST ABOUT THIS JOB?

REFERENCES: GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1			
2			
3			

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NO.

"I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVE, OTHER THAN IT'S PRESIDENT, AND THEN ONLY WHEN IN WRITING AND SIGNED BY THE PRESIDENT HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY CONTRARY TO THE FOREGOING."

DATE _____ SIGNATURE _____

"I AUTHORIZE MEXICAN VILLA FOOD PRODUCTS, INC. TO INVESTIGATE MY EMPLOYMENT BACKGROUND AND PERSONAL REFERENCES. I AUTHORIZE ANY FORMER OR CURRENT EMPLOYERS TO RELEASE INFORMATION TO MEXICAN VILLA REGARDING MY EMPLOYMENT HISTORY."

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____

DATE _____

REMARKS: _____

NEATNESS _____

ABILITY _____

HIRED? YES NO POSITION _____

SALARY/WAGE _____

DATE REPORTING TO WORK _____

APPROVED: _____

MANAGER