EMPLOYMENT APPLICATION

PacFresh Produce Inc. **EQUAL OPPORTUNITY EMPLOYER**

855 N. Blosser Rd, Santa Maria, CA 93458 • (805) 925-8675

PLEASE READ CAREFULLY - WRITE CLEARLY - ANSWER ALL QUESTIONS

THE QUESTIONS FOUND IN THIS FORM ARE BEING ASKED TO PROPERLY EVALUATE YOUR ABILITY AND CHANCE FOR SUCCESS IN THE POSITION FOR WHICH YOU ARE APPLYING. EVERY EFFORT HAS BEEN MADE TO COMPLY WITH APPLICABLE FEDERAL LAW AND LAWS OF OUR STATE. IT IS NOT OUR INTENT TO DISCRIMINATE IN EMPLOYMENT ON ACCOUNT OF RACE, COLOR, SEX, GENDER IDENTITY, ANCESTRY, RELIGION, AGE, NATIONAL ORIGIN, HANDICAP, SEXUAL PREFERENCE, DISABILITY, MARITAL STATUS, VIETNAM ERA VETERAN STATUS, OR ANY OTHER CHARACTERISTIC PROTECTED BY STATE OR FEDERAL LAW.

DATE: _____ POSITION APPLIED FOR: _____

NOTE: THIS APPLICATION MUST BE COMPLETED IN ITS ENTIRETY BEFORE IT WILL BE ACCEPTED. OTHER FORMS OF APPLICATION ARE NOT ACCEPTABLE.

PERSONAL INFORMATION

NAME: _____
LAST FIRST MIDDLE

SOCIAL SECURITY NO.: _____ PHONE NO.: _____

ADDRESS: _____
STREET CITY STATE ZIP

YOU ARE REQUIRED TO COMPLETE AN I-9 APPLICATION AND WILL BE EXPECTED TO PROVIDE APPROPRIATE DOCUMENTATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES AND YOUR IDENTITY.

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE POSITION YOU ARE APPLYING FOR WITH OR WITHOUT ACCOMMODATIONS?
YES [ ] NO [ ]

_____

NAME AND ADDRESS OF PERSON TO BE CONTACTED IN CASE OF EMERGENCY:

_____
NAME ADDRESS PHONE NO.

ARE YOU RELATED TO ANYONE IN OUR COMPANY? YES [ ] NO [ ] IF YES, GIVE NAME: _____

ARE YOU EMPLOYED NOW? YES [ ] NO [ ] WHERE? _____

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES [ ] NO [ ] DATE YOU CAN START: _____

SALARY DESIRED: _____ REFERRED BY (PERSON, NEWSPAPER, RADIO, ETC): _____

HAVE YOU EVER WORKED WITH THIS COMPANY BEFORE? YES [ ] NO [ ] IF YES, STATE WHEN: _____

ARE YOU AT LEAST 18 YEARS OLD? YES [ ] NO [ ]

EDUCATION

LIST HIGH SCHOOL AND ALL COLLEGES, UNIVERSITIES, GRADUATE SCHOOLS, TRADE, BUSINESS OR CORRESPONDENCE SCHOOLS ATTENDED GIVING YOUR MOST RECENT EDUCATION FIRST. (YOU MAY ATTACH AN ADDITIONAL PAGE)

HIGH SCHOOL, COLLEGE, UNIVERSITY, OR TRADE SCHOOL	LOCATION	MAJOR	DEGREE	

LANGUAGES: SPOKEN _____ READ _____ WRITE _____

CONVICTIONS

HAVE YOU, SINCE THE AGE OF 18, EVER BEEN CONVICTED OF A FELONY, EXCEPT MARIJUANA CONVICTIONS MORE THAN TWO YEARS OLD?
YES [ ] NO [ ]
IF YES, EXPLAIN (GIVE DATES): _____.

NOTE: A CONVICTION WILL NOT NECESSARILY BAR YOU FROM EMPLOYMENT. EACH CONVICTION WILL BE JUDGED ON ITS OWN MERITS WITH RESPECT TO TIME, CIRCUMSTANCES AND SERIOUSNESS.

HAVE YOU EVER BEEN DISCHARGED (FIRED) FROM A JOB? YES [ ] NO [ ] IF YES, EXPLAIN & GIVE DATES:

_____

EMPLOYMENT (LIST BELOW PREVIOUS EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST)

DATES	EMPLOYER	STARTING AND ENDING SALARY	POSITION	JOB DESCRIPTION	REASON FOR LEAVING

I CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT ANY MISREPRESENTATION OR OMISSION OF INFORMATION REQUESTED ON THIS FORM IS GROUNDS FOR IMMEDIATE DISMISSAL. I UNDERSTAND THAT WEEKEND WORK, OVERTIME, CHANGES OF SCHEDULE AND LOCATION MAY BE REQUIRED DURING MY EMPLOYMENT. FURTHER, I UNDERSTAND THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE, WITH OR WITHOUT CAUSE. IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO ALL RULES, REGULATIONS AND POLICIES OF THIS COMPANY. NO MODIFICATION OF THESE STATEMENTS SHALL BE VALID UNLESS WRITTEN AND SIGNED BY THE COMPANY PRESIDENT.

DATE: _____ **SIGNATURE:** _____

AGREEMENT

I, THE UNDERSIGNED, UNDERSTAND THAT I AM BEING CONSIDERED AS A POTENTIAL EMPLOYEE OF **PACFRESH PRODUCE, INC.** (THE "COMPANY"), AND HEREBY CERTIFY THAT:

1. I UNDERSTAND THAT IF I AM HIRED, SUCH HIRING WILL NOT BE FOR ANY DEFINITE PERIOD OF TIME. EVEN THOUGH, IF HIRED, I WILL BE PAID MY WAGES ON A MONTHLY, SEMI-MONTHLY, WEEKLY OR HOURLY BASIS, I UNDERSTAND THAT THIS DOES NOT MEAN I AM BEING HIRED FOR A DEFINITE PERIOD OF TIME.

2. I UNDERSTAND THAT IF HIRED, I WILL BE AN EMPLOYEE AT-WILL AND I CAN BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE, WITH OR WITHOUT NOTICE.

3. I UNDERSTAND THAT OFFERS OF EMPLOYMENT FOR CERTAIN POSITIONS, INCLUDING SAFETY SENSITIVE POSITIONS ARE CONDITIONED ON THE SATISFACTORY COMPLETION OF MEDICAL TESTING TO DETECT THE PRESENCE OF ILLEGAL DRUGS.

4. I UNDERSTAND THAT THIS AGREEMENT CANNOT BE CHANGED EXCEPT IN A WRITTEN DOCUMENT SIGNED BY THE COMPANY PRESIDENT AND MYSELF.

5. I HAVE BEEN GIVEN AN OPPORTUNITY TO ASK QUESTIONS REGARDING COMPANY RULES AND MY POTENTIAL STATUS AS AN EMPLOYEE-AT-WILL. NO REPRESENTATIVE OF **PACFRESH PRODUCE INC.** HAS MADE ANY PROMISES OR OTHER STATEMENTS TO ME, WHICH IMPLY THAT I WILL BE EMPLOYED UNDER ANY OTHER TERMS THAN STATED ABOVE.

6. I UNDERSTAND THAT IF HIRED, THIS STATEMENT IS PART OF THE EMPLOYMENT AGREEMENT BETWEEN THE COMPANY AND ME, AND WILL BE BINDING ON ME.

DATE: _____ **SIGNATURE:** _____

THIS PORTION TO BE COMPLETED BY EMPLOYER

INTERVIEWER COMMENTS: _____

Date Employed: _____ Dept.: _____ Position: _____ Pay: _____