



# Hays County Food Bank Employment Application

An Equal Opportunity Employer

## Personal Information

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City State Zip

Telephone \_\_\_\_\_ Email \_\_\_\_\_

Are you under age 18:  YES  NO. If "YES," can you provide proof of eligibility to work?  YES  NO

Are you currently authorized to work in the U.S.?  YES  NO. Proof of eligibility will be required if hired.

Position Applied for: \_\_\_\_\_

Wage desired: \_\_\_\_\_

Employment desired:  Full-time only  Part-time only  Temporary/Contract

### Days/hours available to work:

No preference  Thurs \_\_\_\_\_

Mon \_\_\_\_\_ Fri \_\_\_\_\_

Tue \_\_\_\_\_ Sat \_\_\_\_\_

Wed \_\_\_\_\_ Sun \_\_\_\_\_

When are you available to start work? \_\_\_\_\_

## Education

Type of School	Name of School	Location	Number of Years Completed	Major & Degree
High School				
College				
Business or Trade School				
Professional School				



## Work Experience

*Please list your work experience beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.*

**Name of Employer**

\_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_

Phone number \_\_\_\_\_

Reason for leaving (be specific):

\_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_

Name of last supervisor \_\_\_\_\_

Employment dates \_\_\_\_\_

Pay/Salary \_\_\_\_\_

**Name of Employer**

\_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_

Phone number \_\_\_\_\_

Reason for leaving (be specific):

\_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_

Name of last supervisor \_\_\_\_\_

Employment dates \_\_\_\_\_

Pay/Salary \_\_\_\_\_

**Name of Employer**

\_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code

\_\_\_\_\_

Phone number \_\_\_\_\_

Reason for leaving (be specific):

\_\_\_\_\_

Email \_\_\_\_\_

Job Title \_\_\_\_\_

Name of last supervisor \_\_\_\_\_

Employment dates \_\_\_\_\_

Pay/Salary \_\_\_\_\_

May we contact your present employer?  YES  NO



## Military

Have you ever been in the Armed Forces?  YES  NO

Are you currently a member in the Armed Forces?  YES  NO

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

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## Other

Do you have a valid and current driver's license?  YES  NO

Driver's license number: \_\_\_\_\_ List all restrictions on your license: \_\_\_\_\_

Has your driver's license ever been revoked, suspended, or restricted?  YES  NO

Have you ever been convicted of a crime?  YES  NO (A conviction record will not necessarily disqualify you from employment.)

Employee Referral?  YES  NO Name: \_\_\_\_\_

Did you complete this application yourself?  YES  NO If "NO," who did? \_\_\_\_\_

After reviewing the attached job description, indicate if you are able to perform the essential functions of the job for which you have applied, with or without a reasonable accommodation.  YES  NO

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**Please read the following carefully:**

### Authorization

- I certify that all the information submitted on this application is true and complete. I understand that any intentional misrepresentation of the information or material omission on this application will be sufficient cause for disqualification. If misrepresentation is discovered any time after I am fired, this shall be just cause for dismissal, without notice.
- I hereby authorize Hays County Food Bank to contact, obtain, and verify the accuracy of information provided in this application from all previous employers, educational institutions, and references. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, and organizations for furnishing such information.
- I understand that all Hays County Food Bank staff must drive in connection with their job duties. I hereby authorize Hays County Food Bank to obtain a copy of my driving record which will be used solely to determine suitability for the job for which I am applying. (Submit a copy of current driver's license with application.)
- I understand that the Hays County Food Bank is an equal opportunity employer and does not discriminate against individuals on the basis of race, creed, age, sex, color, political or religious affiliation, national origin, or handicap in the selection employment, or training of any person employed by the organization.
- I agree to conform to Hays County Food Bank's established policies and procedures as published.



- I understand that this application does not constitute an agreement or contract for employment. I understand that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, by me or my employer. I have the right to resign employment at any time.
- I understand the terms and conditions of my employment may be changed, with or without notice, and with or without cause, at any time by Hays County Food Bank.
- I understand that, if hired, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.
- I have read and fully understand the above statements and I seek employment under these conditions.

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Applicant Signature

Print Name

Date

*Thank you for completing this application form and for your interest in our organization!*