



76 East Mill Street  
Akron, Ohio 44308-1402

### APPLICATION FOR EMPLOYMENT

**PLEASE COMPLETE PAGES 1-4**

TODAY'S DATE \_\_\_\_\_

What's your Full NAME? \_\_\_\_\_

Present ADDRESS  
\_\_\_\_\_

Permanent Address (if different from Present)  
\_\_\_\_\_

Are you eligible to work in the U.S?  No  Yes

Telephone (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Position applied for (1) \_\_\_\_\_

and salary desired (2) \_\_\_\_\_

(Be specific) Days/hours available to work

No Pref \_\_\_\_\_ Thur \_\_\_\_\_

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

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

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

How many hours can you work weekly? \_\_\_\_\_ Can you work nights? (Y/N) \_\_\_\_\_

Employment desired  FULL-TIME ONLY  PART-TIME ONLY  FULL- OR PART-TIME

When available to start? \_\_\_\_\_

Do you plan to work another job in addition to this job?  No  Yes

TYPE OF SCHOOL (high school, college, trade/professional school)	NAME OF SCHOOL	SCHOOL LOCATION	NO. YEARS COMPLETED	MAJOR AND DEGREE

HAVE YOU EVER BEEN CONVICTED OF A FELONY?  No  Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

**APPLICATION FOR EMPLOYMENT**

<p>DO YOU HAVE A DRIVER'S LICENSE?  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p>Driver's license number _____                  State of issue _____  <input type="checkbox"/> Operator    <input type="checkbox"/> Commercial (CDL)  <input type="checkbox"/> Chauffeur Expiration date _____</p>	<p>Have you had any accidents during the past three years? <input type="checkbox"/> Yes    <input type="checkbox"/> No                  If so, How many and how long ago?                  _____</p>
<p>Do you have reliable transportation to get to work each day?</p>	<p><input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	
<p>Do you have experience operating Cash Register/POS?    <input type="checkbox"/> No    <input type="checkbox"/> Yes                  if "yes" please describe:                  _____                  _____</p>	<p><b>Do you have Bakery or Food Service Experience?</b>    <input type="checkbox"/> No    <input type="checkbox"/> Yes                  if "yes" please describe:                  _____                  _____</p>	

<b>MILITARY</b>	
<p>HAVE YOU EVER BEEN IN THE ARMED FORCES?    <input type="checkbox"/> Yes    <input type="checkbox"/> No                  BRANCH _____                  Date Entered _____ Discharge Date _____</p>	<p>ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?  <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>

<b>WORK EXPERIENCE</b>				
<p><i>Please list your work experience for the <b>past five years</b> beginning with your most recent job held. If you were self-employed, give firm name. <b>Attach additional sheets if necessary.</b></i></p>				
Employment Dates (from/to) Most Recent first	Company/ Employer Name Address, City State Supervisor name Phone #	Last Job Title Final Pay (hourly or salaried)	Reason for leaving (be specific)	List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company

May we contact your present employer?     Yes     No

Did you complete this application yourself     Yes     No    If not, who did? \_\_\_\_\_

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<b><i>Please list two references:</i></b>		
<b>Name</b>	<b>Relationship/How Known</b>	<b>Phone /Email</b>

***An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.***

**PLEASE READ CAREFULLY**

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Sweet Mary's Bakery (hereinafter called "the Company"), I agree that: Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of The Company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President /General Manager of the Company. Both the undersigned and The Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits. I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact. I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations. I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

**Signature of applicant** \_\_\_\_\_ **Date:** \_\_\_\_\_

Sweet Mary's Bakery is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

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