

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or disability.

Date of Application: _____

Name _____ Social Security No. _____

Present Address _____
No. Street City State Zip

How long have you lived at this address? _____ Telephone # () _____

Job applied for _____ Rate of pay expected \$ _____

Location willing to work (circle all that apply): Gray Milledgeville Oconee Dublin Sandersville

How did you learn of this opening? _____

AVAILABILITY

List of hours available to work per week: _____ Check here if available anytime

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Have you worked for any PBC company before? Y _____ N _____ If yes, When _____ Where _____

HOW WOULD YOU RATE YOURSELF

1 = Improvement Needed 2 = OK 3 = Good 4 = Top Performer

- _____ Energy Level: Your sense of urgency, self-motivation and enthusiasm.
- _____ Communication Skills: Your ability to listen well, express ideas clearly and accept feedback.
- _____ Hospitality: Your natural friendliness and customer service skills.
- _____ Reliability: Your dependability, attendance, self-discipline and dedication.
- _____ Organization: Your ability to multi-task and stay organized.
- _____ Personal Pride: Your appearance, hygiene and achievement.
- _____ Teamwork: Your cooperation with others and team spirit.

1. What achievement in life are you most proud of? _____
2. What are your personal strengths? _____
3. What are your weakest areas? _____
4. What are your five year goals? _____

Do you have any physical, mental, or medical impairments that would interfere with your ability to perform the essential duties of this job? _____ Yes _____ No If yes, list the essential duties you cannot perform.

In case of emergency, contact: _____

Do you have reliable transportation to work? _____ Yes _____ No

Do you have any relative or friends currently working for Pickle Barrel? _____ Yes _____ No

If yes, state relationship to you _____

(PLEASE NOTE: ALL ITEMS ON REVERSE SIDE MUST BE COMPLETED)

LIST BELOW, BEGINNING WITH YOUR MOST RECENT, ALL PRESENT AND PAST EMPLOYMENT

Name, City, and Phone #	Begin Date	End Date	Position / Title	Duties	Salary or Wages	Reason for Leaving	Name of Supervisor

PERSONAL REFERENCES (Not former employers or relatives)

Name and Address	Occupation	Phone Number

School	Name and Address of School	Years Attended		Last Year Completed	Did you Graduate?	Grade Point Avg
		From	To			
High				1 2 3 4		
College/ VO Tech				1 2 3 4		

BACKGROUND

Are you 18 years of age or older? Yes No If no, Date of Birth _____/_____/_____

Have you ever been convicted of any felony? Yes No

Have you ever been convicted of any crime, excluding misdemeanors? Yes No

Have you ever been convicted of any crime involving dishonesty? Yes No

Are you serving probation for any misdemeanor offense? Yes No

Have you ever been counseled or disciplined for cash handling violations? Yes No

Have you ever been counseled or disciplined for being late or absent for work or school? Yes No

If you have answered Yes to any of the above, describe in full. _____

I certify that information given herein is true and complete to the best of my knowledge. I authorize investigation of all statements and references in this employment application as may be necessary in arriving at an employment decision, including requests for criminal or credit reports. I understand that this employment application and any other company documents are not contracts of employment, and that any individual who is hired may voluntarily leave employment upon proper notice and may be terminated by the employer at any time and for any reason. I also understand that any oral or written statements to the contrary are expressly disavowed and should not be relied upon by any prospective or existing employee. I understand that the use of illegal drugs is prohibited during employment. If the company policy requires, I am willing to submit to drug a drug test.

Signed _____ Date _____