

**APPLICATION FOR EMPLOYMENT**  
**An Equal Opportunity Employer**

Thank you for visiting our office to complete an application form. Please be as thorough as possible in providing the requested information so that we may properly evaluate your qualifications.

Savor Seasonings LLC  
4292 Armstrong Boulevard  
Batavia, Ohio 45103  
Phone (513) 732-2333

**PERSONAL INFORMATION**

NAME \_\_\_\_\_  
(last) (first) (middle)

PRESENT ADDRESS \_\_\_\_\_  
(street) (city) (state) (zip code)

TELEPHONE ( ) \_\_\_\_\_

ARE YOU:  Under 18

ALTERNATE NUMBER ( ) \_\_\_\_\_

18 and over

EMERGENCY CONTACT ( ) \_\_\_\_\_

SOCIAL SECURITY \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ARE YOU A U.S. CITIZEN, OR DO YOU HOLD A CURRENT VISA?  YES  NO

IF YOU HOLD A CURRENT VISA, WHAT TYPE? \_\_\_\_\_ EXPIRATION DATE? \_\_\_\_\_

**EMPLOYMENT INTEREST**

Position Desired (1) \_\_\_\_\_ (2) \_\_\_\_\_

PREFER: (check all that apply)

- FULL-TIME
- PART-TIME
- TEMPORARY
- SALARIED

WILLING TO: (check all that apply)

- WORK OVERTIME
- TRAVEL
- RELOCATE
- WORK WEEKENDS

When would you be available to start work?  
\_\_\_\_\_

Referred by:?  
\_\_\_\_\_

Have you ever been convicted of a criminal offense?

(Inquiries concerning criminal records are used strictly for job related purposes.)  Yes  No

If "yes" please explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SKILLS

<input type="checkbox"/> <b>Typing</b> WPM _____  <input type="checkbox"/> <b>Transcription</b> _____  <input type="checkbox"/> <b>Machinery</b> _____  <input type="checkbox"/> _____  <input type="checkbox"/> _____	<input type="checkbox"/> <b>Data Entry/Keypunch</b> Strokes/hr. _____  <input type="checkbox"/> <b>Computer Programming Languages</b> List Language(s) _____  <input type="checkbox"/> _____  <input type="checkbox"/> _____	<input type="checkbox"/> <b>Word Processing Equipment</b> List Machine(s) _____  <input type="checkbox"/> _____  <input type="checkbox"/> <b>Computer Hardware/Software</b> List Hardware/Software _____  <input type="checkbox"/> _____  <input type="checkbox"/> _____
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List any equipment you operate and any certificates or licenses held (i.e., office equipment, printing equipment, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List favorite hobbies or spare time activities\* \_\_\_\_\_

\*Please exclude groups which indicate race, sex, color, religion or national origin.

## EDUCATION

SCHOOL	Name, City and State of School	Course of Study	Grade Average	Circle Last Year Completed	List Diplomas or Degrees
HIGH				1 2 3 4	
BUSINESS/TECHNICAL				1 2 3 4	
COLLEGE		Major    Minor	Overall Major	1 2 3 4	
GRADUATE		Major    Minor	Overall Major	1 2 3 4	
OTHER				1 2 3 4	

High School/College Activities (list offices held)\* \_\_\_\_\_

Scholastic Honors/Awards/Scholarships\* \_\_\_\_\_

Are you pursuing or planning to pursue further studies?    Yes     No     If so, when? \_\_\_\_\_

Where? \_\_\_\_\_    What course of study? \_\_\_\_\_

Day     Night     Full-time     Part-Time

**EMPLOYMENT**

<b>PRESENT/MOST RECENT EMPLOYER</b>	<b>EMPLOYER</b>	<b>TITLE</b>
<b>DATE EMPLOYED</b>	<b>ADDRESS</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
<b>FROM</b> <b>TO</b>	<b>PHONE</b>	<b>Reason for leaving</b>
<b>Base Wages</b> Start _____ End _____	<b>Supervisor</b> May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Duties</b>		
<b>NEXT PREVIOUS EMPLOYER</b>	<b>EMPLOYER</b>	<b>TITLE</b>
<b>DATE EMPLOYED</b>	<b>ADDRESS</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
<b>FROM</b> <b>TO</b>	<b>PHONE</b>	<b>Reason for leaving</b>
<b>Base Wages:</b> Start _____ End _____	<b>Supervisor</b> May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Duties</b>		
<b>NEXT PREVIOUS EMPLOYER</b>	<b>EMPLOYER</b>	<b>TITLE</b>
<b>DATE EMPLOYED</b>	<b>ADDRESS</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
<b>FROM</b> <b>TO</b>	<b>PHONE</b>	<b>Reason for leaving</b>
<b>Base Wages</b> Start _____ End _____	<b>Supervisor</b> May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Duties</b>		
<b>NEXT PREVIOUS EMPLOYER</b>	<b>EMPLOYER</b>	<b>TITLE</b>
<b>DATE EMPLOYED</b>	<b>ADDRESS</b>	<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary
<b>FROM</b> <b>TO</b>	<b>PHONE</b>	<b>Reason for leaving</b>
<b>Base Wages</b> Start _____ End _____	<b>Supervisor</b> May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Duties</b>		

**Have you ever been terminated from a job? Yes  No  If so, when? \_\_\_\_\_**

**List and describe any other skills, qualifications or experiences (including volunteer work) which you feel would make you especially well qualified for employment with Savor Seasonings, LLC.\***

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\*Please exclude groups which indicate race, sex, color, religion or national origin.

**MILITARY SERVICE RECORD**

Were you in the U.S. Armed Forces?  Yes  No If yes, what Branch? \_\_\_\_\_

List duties in the service including special training. \_\_\_\_\_

Have you taken any training under the G.I. Bill of Rights?  Yes  No If yes, list training. \_\_\_\_\_

**REFERENCES**

(List academic and personal references below. Please do not include former employers and relatives.)

NAME/OCCUPATION	ADDRESS	BUSINESS PHONE	HOME PHONE

**APPLICANT: PLEASE READ BEFORE SIGNING**

I hereby give Savor Seasonings L.L.C. the right to make a thorough investigation of my past employment, education, criminal conviction record and other activities and to perform chemical testing for the use of alcohol, illegal drugs and controlled substances, and I hereby release from all liability all individuals, entities and governmental agencies supplying such information. I indemnify Savor Seasonings L.L.C. against any liability which might result from making such investigation. I understand that any false answer or statement or implications made by me in this application or other required documents shall be considered a sufficient basis for denial of employment or discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Savor Seasonings L.L.C. and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon Savor Seasonings L.L.C. unless made in writing and signed by an officer of the Savor Seasonings L.L.C. If hired, I acknowledge that I will be an employee at will. This means that I have the right to terminate my employment at any time and that Savor Seasonings L.L.C. retains a right to terminate my employment with or without cause, and with or without notice, at any time. If hired, I acknowledge that I will comply with any and all policies established by the Company, as well as any directives of its supervisory personnel.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant

**APPLICANT – Do Not Write Below This Area**

**FOR INTERVIEWERS USE**

INTERVIEWER	DATE	COMMENTS

**REFERENCE CHECK**

POSITION NUMBER	RESULTS OF REFERENCE CHECK	POSITION NUMBER	RESULTS OF REFERENCE CHECK
<b>I</b>		<b>III</b>	
<b>II</b>		<b>IV</b>	