

## APPLICATION FOR EMPLOYMENT

The Markets, LLC is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on the basis of race, color, age, sex, national origin, the presence of mental, physical or sensory disability, sexual orientation or any other basis prohibited by federal or state law. Please fully complete the application and sign for consideration of employment.

PERSONAL	L INFORMATION	ON (please p	orint)										
Name:	First		·	Middle			Last				Today's Date		
Other nan	nes you are l	known by:					Are you l	awfully emplo	yable in the	e U.S.?	_Yes1	No	
Present A	ddress:	Number	Street		City	- State	All new hin	res will be requi	=	e proof of eli Number to			
Mailing Ac	ddress:	Number	Street		City	State	Zip Alternative Phone Number  ( )						
EMPLOYM Position	ENT DESIRED n:		Store(s):				D	esired Salary:		Date You	ı Can Start:		
Schedule	fy hours avail Desired: ble to work:	_ Part Time	Full	Time		Monday ghts □ We	Tuesday	Wednesday	Thursday  Overtime	Friday	Saturday	Seasonal	
Please inc Summariz employme	e special job	ocery industrial orelated ski	lls and quali	fications ac	quired fron	n employme	nt, militar	e experienced ry, or other ex e trade areas f	perience th			elative to	
					I have	/ can do the	e followin	g:					
Pay atten	ntion to deta	ils 🗆		Multi Task				Be a quick l	earner				
Work under stress and  deadlines				Good People Skills				Strong follo	ow through				
	feet for an			Handle Hea	avy Lifting			Problem So	lve				
REFEREN	CES	(Please prov	ed at least :	3 profession	nal referenc	ces, whom y	ou've knov	vn for at least	ne year.)			Years	
O Name				р	Phone			Business		Acquainted			
							( )						
							( )						
							( )						
EMPLOYM	ENT HISTORY	(	-			_		st recent one firs		-	-	er	
Date MM/	DD/YY												
From: To:	Employer (Name and Address of Employer - Type of				Business	Business   Starting: Ending: Average # of h			Position:  Reason for Leaving:				
Duties Pe	rformed:							week:	<del></del>	neason for Leaving.			

Supervisor's Nai	me & Title	Phone Nu	mber	May we conta	ct? ( )	□ Yes	□ No
From:	Employer (Name and Address of Employer - Type of Business		Starting	y or   Hourly	Position:		
То:			Average week: _	e # of hours per	Reason for Le	aving:	
Duties Perform	ed:						
Supervisor's Nai	me & Title	Phone Nu	mber	May we conta	ct? ( )	□ Yes	□ No
			1		_		
From:	Employer (Name and Address of Employer - Type of Business		Starting Ending:	y or 🗆 Hourly	Position:		
То:			Average week: _	e # of hours per	Reason for Le	aving:	
Duties Perform	ed:						
	6.701						
Supervisor's Nai	me & litte	Phone Nu	mber	May we conta	ct? ( )	□ Yes	□ No
	PLEASE READ CAREFULLY APPLICANT'S	CERTIFICA	ΓΙΟΝ Α	ND AGREEMEN	NTS		
employed, omis	that the facts set forth in the above employment application ssions of information or falsified statements on this application acknowledgment here)		•		, ,	•	stand that if
additional infor enforcement ag kind which now employment, an	Markets, LLC, in considering my application for employment mation or make any investigation relating to my background gencies to supply any information concerning my background or hereafter may exist against all individuals or entities who and against The Markets, LLC and its agents for their acts performaliciously (please initial acknowledgment)	nd. I authorize or past employ provide inform ormed in conn	e all pe yment h nation t	rsons, schools, o history. I hereby o The Markets, l	companies, ci waive and re LC concernin	redit bure lease all c g my quali	aus and law claims of any ifications for
drug screening or unauthorized acknowledge th of alcohol and circumstances	at The Markets, LLC has a commitment to maintain a drug and test as part of its selection and hiring process. Any applicant of substance will have the offer of employment withdrawn and at any subsequent consideration for employment may be conditilegal drugs. I further understand and agree that if employ during my employment. I will abide by all company policing (please initial acknowledgment here)	who has a conf d may not reap itioned on my yed, I may be	firmed poply for willingn require	positive or dilute employment co ess to undergo ned to submit to	e test for the onsideration for nonitoring for drug/alcohol	presence of or at least the preser testing un	of any illegal cone year. I nce/absence nder certain
Tha	ank you for completing this application form and for	your interes	t in en	nployment wit	th The Mark	ets, LLC.	•
Signature	Date						
	WE ARE AN EQUAL OPPORTUNITY EMPLOYER CO	MMITTED TO H	IIRING A	DIVERSE WORK	FORCE.		

I understand that this application for employment shall be considered active for a period of time not to exceed 60 days from the date of this application. To be considered for employment beyond this time period applicants will be required submit a new application and file it with the company.