



Just What The Country Needs!

# Application for Employment

Thank you for your interest in Coastal Farm! We are an equal opportunity employer and do not discriminate because of national origin, sex, marital status, age, creed, color, race, religion, disability, or veteran status. This application will remain active for 90 days. If you wish to be considered for a job after that time, you must apply by completing a new application form.

Date: \_\_\_\_\_ Please indicate your preference:  Part-Time Work  Full-Time Work

Specify desired hours/days: \_\_\_\_\_ Date you can start work: \_\_\_\_\_

List position(s) you are applying for: \_\_\_\_\_

Have you applied for a job with Coastal Farm in the last 12 months?  Yes  No

Name \_\_\_\_\_ Daytime phone (\_\_\_\_) \_\_\_\_\_  
 Message phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_  
Street address City State Zip

*Please read and respond fully:*  
 Have you ever admitted to or been convicted of a criminal offense (including felonies, misdemeanors, and petty misdemeanors) other than a minor traffic offense? If yes, please indicate the nature of the offense, location (city, county, state) and approximate date of conviction(s).  Yes  No

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(A conviction record will not automatically disqualify an applicant from employment with our company. However, failure to disclose convictions, regardless of when they occurred, may be an omission or misrepresentation of fact resulting in refusal of employment or immediate termination.)

## Education and Training

	School Name/Location	Years Completed	Diploma/Degree	Course of study
High School			Yes No	
Trade School/College			Yes No	
Other			Yes No	

## References – please list three references who are familiar with your work ability.

Name	Business	Title	Phone Number

**Employment History** - List all paid or unpaid work experience for the past 10 years, beginning with your current or most recent job. Do not skip any, even if only employed for a short period. Explain any period of unemployment or gaps. *This section must be filled out completely.*

Employer		Employer City and State	Employer Phone
Dates Employed From:                      To:	Position	Supervisor's Name and Phone Number	
Job Duties			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer		Employer City and State	Employer Phone
Dates Employed From:                      To:	Position	Supervisor's Name and Phone Number	
Job Duties			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Employer		Employer City and State	Employer Phone
Dates Employed From:                      To:	Position	Supervisor's Name and Phone Number	
Job Duties			
Reason for Leaving		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I understand that any misrepresentation or material omission of this application will result in my being eliminated from further consideration. I further understand that, if accepted for employment, any misrepresentation or material omission which becomes known to Coastal Farm will result in immediate termination of my employment.

I hereby authorize Coastal Farm to investigate all statements contained in my application for employment, to contact all references and employers, and to conduct other investigations that it deems appropriate including, but not limited to criminal background checks. I release from liability any persons or employers providing such information, and I also release the company from all liability which might result from making the investigation. Additionally, I understand that I may be required to submit a urine sample for drug screening purposes prior to completion of the employment process and, if hired, at any time during my employment. If I refuse, or if I do not comply with testing procedures, I understand that I will not be considered for employment or may be subject to termination. I understand that if my urine screens positive for illegal substances and/or prescription drugs, use of which has not been prescribed by a licensed physician, I will not be considered for employment or may be subject to discharge. I consent to release of drug testing records to this company.

I understand that, if selected, I will be required to provide proof of my identity and my legal right to work in the United States prior to actual employment with Coastal Farm.

I understand that any employment offered by Coastal Farm is of an "at will" nature, meaning that I may quit at any time, and the company may discharge me at any time, with or without cause, and that, if hired, I am required to abide by all rules and regulations of this company. I understand that no representative of Coastal Farm has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date