



**LAREDO REAL FOODS, INC. 03/18**  
**A DRUG FREE COMPANY ENVIRONMENT**



**Employment Application**

**FORM 101**

*We are an equal opportunity employer.*

Position Applied For: \_\_\_\_\_

Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_

LAST

FIRST

MIDDLE

Address: \_\_\_\_\_

STREET

CITY

STATE

ZIP

Phone: \_\_\_\_\_

Mobile/Fax: \_\_\_\_\_

Date available to Start: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Type of employment desired:

Full - Time

Part-Time

Temporary

Have you been ever convicted of felony?

YES

NO

If yes, please explain: \_\_\_\_\_

Have you ever been employed here before?

YES

NO

Are you legally eligible for employment in this country?

YES

NO

If you are under 18, do you have a work permit?

YES

NO

Education	Name and Location of School	Years Attended	Date Graduated	Subject Studied
Grammar School				
High School				
College				
Trade School				

Employment

Desired:

Position \_\_\_\_\_

Salary Desired \$ \_\_\_\_\_

Are you employed

Yes If Yes where? \_\_\_\_\_

No

Date you can Start \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

If so,

May we inquire of

Yes

your present employer:

No

If no, Give Details: \_\_\_\_\_

Laredo Real Foods and affiliated companies are in compliance with all **Federal and State Labor Laws** and follow all guidelines by the Equal Employment Opportunity Commission (EEOC), US Dept of Labor guidelines and procedures. Laredo Real Foods, Inc. and affiliate companies do not discriminate any applicants nor existing employees in accordance with the Title VII of the Civil Rights Act of 1964. For more on employee rights and laws, please read posted Labor Law Posters posted at each business location bulletin area.

**Continued on other side**

LRF 573-101

**Physical Records:**

Do you have any physical defects that preclude you from performing any work for which you are being considered?

Comments:

**References:**

Give Below the names of three persons not related to you, whom you have known at least one year

Name	Address	Business	Years Known
1			
2			
3			

**Former**

Employers: (List below at least three employers, starting with last one first)

Date Month and year	Name and address of employer	Salary	Position	Reason for Leaving

I authorize the investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is a cause for dismissal, further, I understand and agree that my employment is for no definite period and may, regardless of the date of hire or payment of my wages and Salary, be terminated any time without any previous notice. If hired, I am subject to follow company rules and policies form 3-1

Date \_\_\_\_\_

Signature \_\_\_\_\_

Do not write below this line

Remarks: \_\_\_\_\_

Neatness		Character	
Personality		Ability	

Hired	For Dept.	Position	Will Report	Salary Wages

Approved 1

\_\_\_\_\_  
Manager