



HIGHLAND HEALTH FOODS, INC.
149 Skokie Valley Rd.
Highland Park, IL 60035
Phone: 847-831-0460
Fax: 847-831-0445
Email: HighlandHealthFoods@yahoo.com

EMPLOYMENT APPLICATION

NAME:

LAST FIRST MIDDLE

ADDRESS:

STREET (INCLUDE APT. #) CITY STATE ZIP

HOME PHONE:

BEST TIME TO CALL:

PHONE:

CELL PHONE/ALTERNATE CONTACT:

EMAIL ADDRESS:

POSITION APPLIED FOR:

SALARY DESIRED:

HOURS/DAYS AVAILABLE:

DAY	MON	TUES	WED	THURS	FRI	SAT	SUN
HOURS							

WOULD YOU BE WILLING TO WORK EVENINGS?

SATURDAYS?

SUNDAYS?

(YES) (NO)

Are you legally eligible for employment in the U.S.A? _____

Are you over 18 years of age? _____

Do you know any employees of this company? _____

*If YES, WHO? _____

HOW DID YOU HEAR ABOUT US?

Have you been convicted of a felony in the last 10 years? () Yes () No

*If YES, please explain

Business References
(Managers, Supervisors, Leads, Co-workers)

Name	Company	Title	Phone

*This information will not be used in violation of any federal, state or local equal employment opportunity law.

EMPLOYMENT HISTORY

List each job held, starting with your present or last job.

EMPLOYER INFO		DATES OF EMPLOYMENT		SALARY	IMMEDIATE SUPERVISOR
Employer:		From:		Starting:	Name:
City/State:	Phone:	To:		Ending:	Phone:
Job duties:					
Reason for Leaving:					
EMPLOYER INFO		DATES OF EMPLOYMENT		SALARY	IMMEDIATE SUPERVISOR
Employer:		From:		Starting:	Name:
City/State:	Phone:	To:		Ending:	Phone:
Job duties:					
Reason for Leaving:					
EMPLOYER INFO		DATES OF EMPLOYMENT		SALARY	IMMEDIATE SUPERVISOR
Employer:		From:	Starting:		Name:
City/State:	Phone:	To:	Ending:		Phone:
Job duties:					
Reason for Leaving:					

EDUCATION

List all education received in U.S.A or any other country.

	Name & Location	No. of Years	Degree Received
High School			
College			
Other			

COMPUTER SKILLS

	Classroom or On-the-Job Training		Proficiency Level		
	YES	NO	BEGINNING	INTERMEDIATE	ADVANCED
QuickBooks					
Microsoft Word					
Excel					
Basic Computer Skills					
Other: _____					

SPECIAL SKILLS OR TRAINING (That may qualify you for work with our company):



HIGHLAND HEALTH FOODS, INC.
149 Skokie Valley Rd.
Highland Park, IL 60035
Phone: 847-831-0460
Fax: 847-831-0445
Email: highlandhealthfoods@yahoo.com

Equal Opportunity Statement

Highland Health Foods is an equal opportunity employer and does not discriminate on the basis of race, color, gender, religion, age, nation or ethnic origin or disability.

PRE-EMPLOYMENT STATEMENT

I understand that as part of the normal procedure for processing my employment application, an investigative consumer report may be prepared and I have the right to make a written request to receive detailed information about the nature and scope of this investigation. I authorize the company and its agents to verify the information on this application. I authorize all persons, schools, companies and law enforcement authorities to release information concerning my background, and I hereby release them from any liability for any damage whatsoever for issuing this information.

In the event that I am hired, I understand that my employment can be terminated with or without cause, and with or without notice, at any time at the option of either the company or myself. I understand that no employee or agent of the company other than the President is authorized to offer me an employment relationship other than one which is terminable at will. I further understand that any deliberate misstatement of fact or omission from this application will result in my immediate dismissal.

If employed, I further agree to comply with all company rules, policies and procedures, including those pertaining to patent/invention matters, conflict of interest, health, safety and security, and non-smoking within the facility.

Applicant's Signature

Date