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Applicant #: _____

Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States. George's is an Equal Opportunity Employer and an E-Verify Employer.

You must be 18 years of age or older to be considered for employment. All shaded areas must be completed for the application to be considered.

POSITION APPLIED FOR:

LOCATION:

PERSONAL INFORMATION

Please enter your LEGAL name as shown on your documents.

First Name Last Name Middle Initial

If no middle name, check this box

Social Security Number

Address

Street

Apt #

City

State

Zip Code

Please enter a working phone number or we will not be able to contact you if you are selected for an interview.

Mobile/Personal Phone

Home Phone

EDUCATION

You must list one school.

City, State, Country

Highest Grade Completed

Primary School:	1 st	2 nd	3 rd	4 th	5 th
	6 th	7 th	8 th		
High School	9 th	10 th	11 th	12 th	
Vo-tech/College:	Graduate?	Yes	No		
Other:					

WORK HISTORY

Work history is work that is full time, part time, temporary, self-employed or military service.

If you have experience in any of the following areas please check the box:

- Forklift Machine Operator Poultry Plant Production
- Live Hang Meat Plant Production Sanitation Debone
- Hatchery Industrial Maintenance Mechanic

If you have never worked please check this box:

Company	City	State	Employed From MO/YR	To MO/YR
Title/Duties	Reason for Leaving			Final Pay Rate

Company	City	State	Employed From MO/YR	To MO/YR
Title/Duties	Reason for Leaving			Final Pay Rate



Company	City	State	Employed	
			From MO/YR	To MO/YR
Title/ Duties	Reason for Leaving		Final Pay Rate	

Please tell us how you heard about this opening (Select One):

- Walk-in Government Employment Agency Employee Referral
- Job Fair NWA Democrat Gazette George's Inc. Employment Center Digital Sign
- Other La Prensa Libre

PLEASE READ BEFORE SIGNING THIS APPLICATION

- A. I certify that the information on this application is true and correct, and I understand that any misrepresentation or omission of any information will result in my disqualification from consideration for employment or, if employed, my immediate dismissal when discovered.
- B. George's, in considering my application for employment, may verify the information set forth on this application and obtain additional information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus, and law enforcement agencies to supply any information concerning my background.
- C. Should I be employed, I understand that such employment is contingent upon satisfactory background reports and medical screening. I understand that this application, and any other company documents, are not contracts of employment, and that any individual who is hired may voluntarily leave upon proper notice. Likewise, George's can terminate my employment at any time with or without cause, unless otherwise required by law. I further understand that no one other than George's Vice President of Human Resources, Environmental Health & Safety has the authority to enter into an employment contract or agreement with me, and that my at-will employment can be changed only by a written agreement signed by George's Vice President of Human Resources, Environmental Health & Safety. I agree that, if hired, I will obey George's rules, including treating confidentially any information I learn during my employment. I also understand that, if hired, my employment will be subject to a probationary period.
- D. I understand that George's has a commitment to maintain an alcohol and drug-free workplace and that George's, unless prohibited by state law, requires a drug screening test as a part of its selection and hiring process. I understand that such drug screening will consist of the testing of a urine sample or other medically recognized test designed to detect traceable amounts of a controlled substance in my body. If, after a second confirmatory test reviewed by a Medical Review Officer, it is determined my specimen contains a prohibited controlled substance or was altered or substituted, I will be disqualified from consideration for employment and any offer of employment will be withdrawn. I further understand and agree that if I am employed, I may be required to submit to alcohol and/or drug-testing during my employment.
- E. I authorize the use of any information in this application to verify my statements, and I authorize past employers, references and any other persons to answer all questions asked concerning my ability, character, and previous full employment record. I further hereby authorize George's to disclose to any person with whom I may hereafter seek employment, my full personnel record, including the reason for termination, or any other information it may have concerning me. I release all such persons and this Company from any liability or damages on account of having sought or furnished such information.
- F. I acknowledge that I have been advised that this application will remain active for not more than (Hourly-30 days; Management/Management Support-6 months) from the date it was made and that if I am not employed by the Company during that period, it will be necessary for me to file a new application for employment with the Company for further consideration.
- G. This certifies that I agree with the above information and that all entries on this application and all related forms are true and complete to the best of my knowledge

Signature _____

Date _____

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EEO-1 VOLUNTARY SELF IDENTIFICATION FORM

The Company is subject to certain governmental record keeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the Company invites employees and applicants to voluntarily self-identify their gender and race/ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Position Applied for:

Location:

GENDER: (Check one)

Male Female No Disclosure

ETHNICITY: (Check one)

Are you Hispanic or Latino?

No, I am not **Hispanic or Latino**.

Yes, I am **Hispanic or Latino** - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish, culture or origin regardless of race.

RACE: - IMPORTANT - Only complete this section if you checked "No, I am not Hispanic or Latino" in the Ethnicity section above:

What is your race? Select **ONE** of the following categories:

White - (Not Hispanic or Latino) A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American - (Not Hispanic or Latino) A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander - (Not Hispanic or Latino) A person having origins in any of the peoples of the Marshall Islands, Hawaii, Guam, Samoa, or other Pacific Islands.

Asian - (Not Hispanic or Latino) A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native - (Not Hispanic or Latino) A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races - (Not Hispanic or Latino) All persons who identify with more than one of the above five races.

I do not want to disclose this information.

Date completed: