

**Shelton's Natural Foods Market**

428 Center Street, Healdsburg CA 95448  
Tel 707-431-0530; Fax 707-431-1268

**APPLICATION FOR EMPLOYMENT**  
Please: Write, Type or Print Plainly

The filing of this Application does not indicate that there are positions open and it in no way obligates Shelton's Natural Foods Market ("Employer"). The information contained herein is the property of Employer.

Name \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
           Last                    First                    Middle

Present Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ How Long? \_\_\_\_\_

Previous Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ How Long? \_\_\_\_\_

Email address \_\_\_\_\_

Home or Message Phone Number ( \_\_\_\_ ) \_\_\_\_\_ Referred by: \_\_\_\_\_

Related to anyone in our employ?    Yes                      No                      If yes, state name and position \_\_\_\_\_                      Explain to interviewer.

**EMPLOYMENT DESIRED**    Part Time                      Full Time

Position \_\_\_\_\_ Date you can start \_\_\_\_\_

Any objection to overtime work? Yes                      No

Are you employed now? \_\_\_\_\_ If so, may we contact your present employer? \_\_\_\_\_

Ever applied here before? \_\_\_\_\_ When? \_\_\_\_\_

Driver's License?    Yes                      No                      Number \_\_\_\_\_ State \_\_\_\_\_ Exp. Date \_\_\_\_\_

**(For Driving Position Only)** You will be required to provide a current DMV report. Please also provide details and dates of any accidents, moving violations or tickets received in the last 7 years: \_\_\_\_\_

Have you ever been convicted of a felony? Yes                      No                      A yes answer does not eliminate you from consideration for employment.

If Yes, Explain: \_\_\_\_\_

Have you ever been bonded? Yes                      No                      When? \_\_\_\_\_ Are you presently bondable? Yes                      No

Are you at least 18 years of age? Yes                      No                      If not, do you have a permit to work? Yes                      No

Please list special training and skills (licenses, machines operated, software programs, computer skills, etc.) \_\_\_\_\_

<b>EDUCATION</b>	Name and Location of School	Did you graduate?	Major or Course
High School	_____	_____	_____
College	_____	_____	_____
Trade, Business or Correspondence School	_____	_____	_____

**ACTIVITIES AND INTEREST** (You may exclude those which indicate race, color, religion, sex, age or national origin.)

What hobbies do you enjoy? \_\_\_\_\_

## NAMES - DATES - ADDRESSES - TELEPHONE NUMBERS - ARE IMPORTANT

**FORMER EMPLOYERS:** (List below three most recent employers, starting with last one first. Use separate sheet if necessary).

Month and Year	Name and Telephone Number of Employer	Salary	Position	Reason for leaving
From				
To				
From				
To				
From				
To				

**REFERENCES:** Give below the names of three persons not related to you, whom you have known at least a year.

Name	Telephone Number and Address of Reference	Business	Years Acquainted

In case of Emergency, notify: \_\_\_\_\_  
Name
Address
Phone Number

I swear under penalty of perjury that all of the information provided by me for this job application is true. I hereby authorize investigation of all statements made by me in this application. I authorize the references listed above to provide the Employer any and all information concerning my employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Employer or its agents. I understand that any misrepresentation, falsification or material omission of information on this application may result in my failure to receive an offer or, if I am hired, my dismissal from employment.

I understand that the ability to work overtime is a condition of employment.

I understand and agree that, if I am hired by Employer, our relationship will be for an unspecified term and it will be employment at-will. Consequently, the employment relationship can be terminated at will, by either the Employer or me, at any time either with or without cause or advance notice. No one other than Ernie Shelton has the right or the authority to enter into any agreement for any different terms of employment. Any such agreement must be in writing, signed by Marty Shelton.

I understand and agree that, if I am hired by Employer, any controversy or claim arising out of my employment with Employer which is not resolved informally shall be settled by mandatory binding arbitration in accordance with the Employment Dispute Resolution Rules of the American Arbitration Association. If hired, I agree to sign a written arbitration agreement consistent with the above.

I understand that Employer does not discriminate against disabled applicants who are otherwise qualified to perform the essential functions of a particular position. If I am an individual with a disability and require a reasonable accommodation in order to perform the essential functions of a particular position, I will discuss it with my interviewer. I understand that if the accommodation can be accomplished without creating an undue hardship, the Employer will be happy to cooperate in making this accommodation.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

Thank you for your interest in Shelton's Natural Foods Market.

Why are you interested in this particular job? \_\_\_\_\_

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What skills, training, and work experience qualify you for this position? \_\_\_\_\_

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Why do you live in Sonoma County? \_\_\_\_\_

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What's important to you about a work place? \_\_\_\_\_

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What qualities do you look for in management? \_\_\_\_\_

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What is your definition of organic food? \_\_\_\_\_

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Hobbies, other interests? \_\_\_\_\_

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Charities, community involvement? \_\_\_\_\_

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Do you know anyone employed at Shelton's Market? \_\_\_\_\_

Who? \_\_\_\_\_