

EMPLOYMENT APPLICATION

Please complete the entire application and print clearly.

Capri Markets LLC PO Box 696 Greenville, Illinois 62246

Capri Markets LLC is an equal opportunity employer and does not discriminate against any individual in any phase of employment in accordance with the requirements of local, state and federal law. We also provide reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. Please advise us if you require an accommodation in the application process.

Applicant Information

Application Date _____

Applicant Full Name: _____

Home Address: _____ City/State/ZIP: _____

Telephone#: _____ Are you at least 18 years of age? ☐ Yes ☐ No

Email Address: _____ Social Security #: _____

Driver's License #: _____ State Issued _____ Expiration Date: _____

Do you have a reliable means of transportation? ☐ Yes ☐ No What is it? _____

How were referred you to our company? _____

Do you have any friends or relatives who work here? If yes, please list here: _____

Have you applied to/ or worked for our company before? ☐ Yes ☐ No If yes, when? _____

Are you legally eligible for employment in the United States? ☐ Yes ☐ No (Proof will be required if hired)

Have you ever been discharged or have you resigned from a job because your employer indicated that it believed you were involved in workplace incident(s) relating to violence, threats of violence, possession of weapons, suspected theft, repeated harassment of employees, customers or vendors, lewd behavior, possession of alcohol or illegal drugs, or being under the influence of alcohol or illegal drug usage at its workplace? ☐ Yes ☐ No If Yes, please explain;

Have you ever been convicted of a crime? ☐ Yes ☐ No (*Existence of a criminal record does not automatically bar you from employment*) If Yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s), and types of rehabilitation. (*Applicants in Illinois are not required to disclose sealed or expunged records of conviction.*)

Position Information

Position Applied For: _____ Full or Part Time? ____ FT ____ PT

Are you willing to work any shift, including nights and weekends? ____ Yes ____ No

If no, please state any limitations: _____

If applicable, are you available to work overtime? ____ Yes ____ No

If you are offered employment, when would you be available to begin work? _____

Do you require any reasonable accommodation to perform the essential functions of the position you are applying for? ____ Yes ____ No If yes, please describe _____

Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on a separate piece of paper If you do not wish us to contact one of the employers listed below, tell us which one(s) and why.

Employer Name: _____

Supervisor Name: _____ Phone #: _____

Address: _____ City/State/ZIP: _____

Job Duties: _____ Final Rate of Pay: _____

Dates of Employment: From (MM/YY) _____ To From (MM/YY) _____

Reason for Leaving: _____

Employer Name: _____

Supervisor Name: _____ Phone #: _____

Address: _____ City/State/ZIP: _____

Job Duties: _____ Final Rate of Pay: _____

Dates of Employment: From (MM/YY) _____ To From (MM/YY) _____

Reason for Leaving: _____

Employer Name: _____
Supervisor Name: _____ Phone #: _____
Address: _____ City/State/ZIP: _____
Job Duties: _____ Final Rate of Pay: _____
Dates of Employment: From (MM/YY) _____ To From (MM/YY) _____
Reason for Leaving: _____

Employer Name: _____
Supervisor Name: _____ Phone #: _____
Address: _____ City/State/ZIP: _____
Job Duties: _____ Final Rate of Pay: _____
Dates of Employment: From (MM/YY) _____ To From (MM/YY) _____
Reason for Leaving: _____

Employer Name: _____
Supervisor Name: _____ Phone #: _____
Address: _____ City/State/ZIP: _____
Job Duties: _____ Final Rate of Pay: _____
Dates of Employment: From (MM/YY) _____ To From (MM/YY) _____
Reason for Leaving: _____

Applicant's Education and Training

College/University Name and City, State _____
Did you receive a degree? ____ Yes ____ No If yes, degree(s) received: _____
High School/GED Name and City, State _____ Diploma? __ Yes __ No
Other Training (graduate, technical, vocational): _____

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements: _____

Military Service: _____ Yes _____ No If yes, Years _____ Branch: _____

Specialized Training: _____

References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____ Telephone#: _____

Address: _____ City/State/ZIP: _____

Relationship: _____ How long have you known them?: _____

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Address: _____ City/State/ZIP: _____

Relationship: _____ How long have you known them?: _____

READ THE FOLLOWING CAREFULLY, THEN SIGN AND DATE THE APPLICATION

The information contained in this application is true and complete to the best of my knowledge and belief. I understand that any false or inaccurate information or misrepresentation of fact or omission of information requested, as stated or implied, given in my application, interview(s), or any other employment form, may be sufficient reason not to hire me and may be reason for dismissal. I understand that I may be required to pass a pre-employment drug screen, and if hired, I will be subject to Capri Markets LLC drug and alcohol testing policy during my employment. I understand and agree that all information furnished in this application may be verified by Capri Markets LLC or its authorized representative. I waive any right I may have to notice from any individuals and organizations named or referred to in this application prior to the release of any employment or education information to Capri Markets LLC. I hereby authorize all individuals and organizations named or referred to in this application to give Capri Markets LLC all information relative to such verification and hereby release such individuals, organizations, and Capri Markets LLC from any and all liability for any claim or damage resulting therefrom. I understand that, if hired, I will be required to provide documentation of both my identity and employment eligibility in the United States in accordance with the Immigration Reform and Control Act of 1986. I understand that, if hired, my employment will be subject to various guidelines, rules and regulations of Capri Markets LLC as stated in an employee handbook, any policy and procedure manual or other communications to employees. I further understand that Capri Markets LLC's policies and procedures are subject to modification without notice. If the specific location for which I am hired has an active Collective Bargaining Agreement in force, I understand that I am further governed by its rules and regulations.

I understand that Capri Markets LLC is not obligated to provide employment and that I am not obligated to accept employment. Nothing in this application, or in any prior or subsequent oral or written statement, is intended to create any contract of employment or to create any rights in the nature of a contract of employment either express or implied. This application does not bind either party for a specific period of time regarding employment. I understand that no one other than an Officer of Capri Markets LLC has any authority to enter into any agreement contrary to the foregoing. If hired, nothing in this application shall restrict my right as an employee or the right of Capri Markets LLC as an employer to terminate my employment at any time, with or without notice and with or without cause, unless otherwise governed by an active Collective Bargaining Agreement.

I hereby acknowledge that I have read and understand the above statement.

Signature of Applicant _____ Date _____

Revision Date: 10/15/2023