Kilwin's Quality Confections **EMPLOYMENT APPLICATION**

It is our policy to provide equal employment opportunities to all qualified persons without regard to race, age, color, sex (including sexual orientation and gender identity), religion, national origin, marital status, height, weight, veteran status, genetic information, disability, or any other category protected by law. Please advise the interviewer if you have a need for an accommodation in order to complete the application process.

Please be advised that your application will go into our active file 6 months from the date of application if you are not hired. If you desire to keep your application active after 6 months, please notify the Director of Human Resources in writing, prior to the expiration of the 6-month period that you would like to remain on Kilwin's Quality Confections active applicant list. If you do not do so before expiration of the 6-month period, you will be taken off of the active applicant list and you will not be considered for employment when a vacancy occurs unless you submit an entirely new application.

Date:	Daytime phone: (Include Area Code)		Eve	Evening phone: (Include Area Code)		
		(Include Area Code)				
Full Name:(Please Print Clearly) (Fir	ret) (M	liddle) (Las	Are you	น 18 years or old	er? Yes: 🔲 No: 🔲	
			.,			
Present Address: _	(Number)	(Street)	(City)	(State)	(Zip Code)	
	(Number)	(Sileet)	(Oity)	(State)	(Zip Code)	
Previous Address: _	(Number)	(Street)	(City)	(State)	(Zip Code)	
Email address (if ap			, <i>,</i>	, ,	,	
Position Desired:	,		Wage	desired:		
_	(Please be spec	ific)	Wage			
Do you have current	and unrestric	ted authorization to	work in the United S	tates? Yes: □ N	lo: <u> </u>	
When can you begir	work?	н	low many hours per	week can you wo	ork?	
List any dates/times	you are not a	vailable to work:				
•						
Dates of special occ	asions (vacati	ions etc.) you will be	e unable to work?			
Dates of Special occ	asions (vacati	ons, cto., you will be	diable to work:			
			an a falani 2 Maa 🗆	No. 🗆		
If yes, please provide	e date, nature	of incident, and disp	or a felony? Yes: \Box DOSition. (Please note this e time of conviction, date of	will not automatically o		

EDUCATION:

School	Name of School	City, State	Course	Graduate?
High School				
College				
Other				

PREVIOUS EMPLOYMENT:

- Please identify all employers (include complete mailing address: street number, name, city, state, zip code, etc.) for the past 10 years or since leaving school, whichever period is longer. Attach additional sheet(s) if necessary.
- Please indicate either: (F) Full-time, (P) Part-time (V) Volunteer
- Please account for all periods of unemployment for two weeks or longer.

LAST Employer:	Phone:			
	(Name)		(Include Area Code)	
Address:(Number)	(Street)	(City)	(State)	(Zip Code)
(Number)	(Sileel)	(City)	(State)	(Zip Code)
Position Held:		From:	_ To:	Salary:
Reason(s) for leaving:				
Any gaps in employment and/or unem	nployment must b	e explained. Inclu	de dates (mon	th/year) and reason(s)
SECOND to the LAST Employer:	(Name)	Phone: (Include Area Code)		
	(Name)		(include	Area Code)
Address: (Number)	(Street)	(0)(1)	(0)	(7: 0 1)
(Number)	(Street)	(City)	(State)	(Zip Code)
Position Held:		From:	_ To:	Salary:
Reason(s) for leaving:				
Any gaps in employment and/or unem	nployment must b	e explained. Inclu	de dates (mon	th/year) and reason(s)
THIRD to the LAST Employer:			_ Phone:	
	(Name)		(Include	e Area Code)
Address: (Number)	(Street)	(City)	(04-4-)	(Zip Code)
(Number)	(Street)	(City)	(State)	(Zip Code)
Position Held:		From:	_ To:	Salary:
Reason(s) for leaving:				
Any gaps in employment and/or unem				th/year) and reason(s

[FOR PREVIOUS EMP	LOYERS WITHIN TH	E PAST TEN YEA	ARS, ATTACH ADI	DITIONAL SHEETS IF NECESSARY]
For the purpose of ve different name at any				worked or attended school under a
If yes, please provide	e name(s) used:			
Have you ever been	terminated or asked	to resign from a	prior job, regardle	ess of how long ago? Yes: ☐ No: ☐
If yes, please provide	Name of Employer	(s):		
Reason(s) for termina	ation:			
REFERENCES:				
Name	Address	Phone	Years Acquainted	Occupation
(1)				
(2)				
(3)				
with any Kilwin's Qualit Quality Confections and compensation is for no at the option of either K may change the terms I authorize Kilwin's Quaexecute, as a condition Kilwin's Quality Confect will, upon request, subscomplete, and correct to or omission to any queevent of employment.	y Confections represed me. I understand that definite period, and calliwin's Quality Confections of my earlity Confections to veriof employment or contions to obtain access stantiate all statements to the best of my know stion will be sufficient of pplication was comple	ntative is intended at if an employment an be terminated witions or me. I also employment at any rify all the information and copies of resident and copies of r	It to create a contract relationship is estable to relationship is estable to relationship is estable to relationship is estable to the relation I have provided int, any additional wecords pertaining to this application and id that a false states on of my application	s or procedures, or my communications of of employment between Kilwin's ablished, my employment and e and with or without notice, at any time, gree that Kilwin's Quality Confections out cause, with or without notice. I on my application. I also agree to written authorizations necessary for this information. I certify that I can and that such statements are true, ment, false answer, misrepresentation, in or my immediate discharge in the
Signature of Applicant:				Date: