



650 IONIA AVE. SW • PO Box 3110 • GRAND RAPIDS, MICHIGAN 49501

## APPLICATION FOR EMPLOYMENT

Applicants are considered for available positions without regard to race, color, religion, sex, national origin, age, marital, disability, or veteran status.

Position Desired \_\_\_\_\_ Date of Application \_\_\_\_/\_\_\_\_/\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Alternate ( ) \_\_\_\_\_ Email \_\_\_\_\_

How did you learn of this position? \_\_\_\_\_

Have you worked for this company before? Yes No If yes, when? \_\_\_\_\_

Hours Desired Full-Time Part-Time Temporary/Seasonal

Shift Preferred \_\_\_\_\_ Are you over 18? Yes No

Starting Salary Desired \_\_\_\_\_ Date available to start work \_\_\_\_\_

Are you able to perform all duties and functions of the job for which you are applying, with or without reasonable accommodation? Yes No

Are you willing to take a physical/drug test if you receive a job offer? Yes No

Have you ever been convicted of any crime other than a routine traffic offense? (Includes a "no contest" or "guilty" plea)

Yes No If yes, explain \_\_\_\_\_

Are you currently under indictment or charged with a felony? Yes No

If yes, explain \_\_\_\_\_

Have you ever been fired, dismissed, asked to resign, resigned by mutual agreement, or otherwise been terminated from any job? Yes No

If yes, what job, and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EDUCATION

School	Name & Location	No. of Years Completed	Grade Point Average	Did You Graduate?	Major/Degree Received
High School					
College or Technical School					
Post Graduate					
List activities, including athletics: _____					

## EMPLOYMENT

Please list your work experience beginning with your most recent job held.

(1) Employer \_\_\_\_\_ Telephone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 Dates employed                      From \_\_\_\_\_ To \_\_\_\_\_  
 Hourly rate/salary                      Starting \_\_\_\_\_ Final \_\_\_\_\_  
 Duties performed/Skills used or learned \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 May we contact?  Yes  No

(2) Employer \_\_\_\_\_ Telephone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 Dates employed                      From \_\_\_\_\_ To \_\_\_\_\_  
 Hourly rate/salary                      Starting \_\_\_\_\_ Final \_\_\_\_\_  
 Duties performed/Skills used or learned \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 May we contact?  Yes  No

(3) Employer \_\_\_\_\_ Telephone (    ) \_\_\_\_\_  
 Address \_\_\_\_\_ Job Title \_\_\_\_\_  
 \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_  
 Dates employed                      From \_\_\_\_\_ To \_\_\_\_\_  
 Hourly rate/salary                      Starting \_\_\_\_\_ Final \_\_\_\_\_  
 Duties performed/Skills used or learned \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 May we contact?  Yes  No

Summarize any special skills and qualifications acquired from employment or other experience \_\_\_\_\_

Please list three references (not related to you) that can provide us with information regarding your qualifications to perform the job for which you are applying.

Name	Address	Phone Number	Occupation

In case of emergency, please notify

Name	Relationship	Phone Number
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**PLEASE READ CAREFULLY**

I authorize the above references to provide information to Van Eerden Foodservice regarding my employment, education, character, and qualifications.

I understand that my employment relationship with The Distribution Group Inc. (a.k.a. Van Eerden Foodservice) is at will, meaning that either I or Van Eerden Foodservice may terminate the employment relationship at any time, with or without cause, and with or without prior review, notice or warning.

Van Eerden Foodservice requires final candidates for employment to submit to a post-offer drug test. Employment is contingent upon the results being negative. All employees whose job requires a chauffeur's license receive the standard DOT physical mandated by the Department of Transportation which includes a drug screen. Physicals will also be performed for all employees being placed in safety-sensitive positions. These tests are paid for by Van Eerden Foodservice unless the employee does not complete six months of continuous employment. In that event, I agree that the cost of any tests performed will be withheld from my final paycheck.

I agree that any lawsuit or claim against Van Eerden Foodservice arising out of my employment or termination of employment (including, but not limited to, claims arising under state, federal or local civil rights laws) must be brought within the following time limits or be forever barred: (a) for lawsuits requiring a Notice of Right to Sue from the Equal Employment Opportunity Commission, within 90 days after the EEOC issues that Notice; or (b) for all other lawsuits, within (i) 180 days of the event(s) giving rise to the claim, or (ii) the time limit specified by statute, whichever is shorter. I waive any statute of limitations that exceeds this time limit.

All records, information, materials and software to which I may have access in the course of my employment are considered confidential. I agree to treat them as strictly confidential during and after my employment, and to return all such materials to Van Eerden Foodservice immediately when my employment ends. I will not disclose, to any person or organization, any confidential information acquired in the course of my employment with Van Eerden Foodservice. I will not use such information for my own benefit or the benefit of any other person or organization other than Van Eerden Foodservice and its customers.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment including the contact of prior employers. If employed, any misstatement or omission of fact on this application may result in my dismissal. I understand that I am required to abide by all rules and regulations of the company.

\_\_\_\_\_  
Date

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