



Employment Application
Denio's Roseville Farmers Market & Auction, Inc.
 2013 Opportunity Drive, #140, Roseville, Ca 95678 PH: 916-782-2704
Equal Opportunity Employer

FOR OFFICE USE ONLY	
EMPLOYEE # _____	
BADGE # _____	
<input type="checkbox"/>	<input type="checkbox"/> ACCPAC
<input type="checkbox"/>	<input type="checkbox"/> TIME MASTER
<input type="checkbox"/>	<input type="checkbox"/> BADGE
<input type="checkbox"/>	<input type="checkbox"/> NEW HIRE

PLEASE PRINT CLEARLY

DATE: _____ / _____ / _____

Application Information

NAME _____	EMAIL _____
ADDRESS _____	PHONE _____
CITY _____	ZIP _____

POSITION DESIRED _____	DATE YOU CAN START _____
EVER APPLIED TO OR WORKED FOR DENIO'S? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, WHEN? _____
DO YOU HAVE ANY FRIENDS OR RELATIVES WORKING FOR DENIO'S? <input type="checkbox"/> YES <input type="checkbox"/> NO	
State their name: _____	Relationship: _____
ARE YOU AT LEAST 18 YRS OLD? <input type="checkbox"/> YES <input type="checkbox"/> NO (If under 18, work permit will be required.)	
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO	

Have you ever been convicted of a felony? (Convictions for misdemeanor marijuana-related offenses that are more than two years old need not be listed. Also any convictions that have expunged, sealed or dismissed need not be listed.) <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, explain: _____ _____

Are you able to perform the essential functions of the job for which you are applying? <input type="checkbox"/> YES <input type="checkbox"/> NO If no, describe the functions that may require accommodation. _____ _____ (Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions).
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SPECIAL SKILLS Please list languages, other than English, you speak or write. _____ List other experience, training, qualifications or skills which you feel make you especially suited for work at Denio's. _____ _____

Type	Name & Location of School	Did You Graduate?	Subjects Studied
High School			
College/University			
Vocational/Business			

Month and Year	Employer: Name, Address & Phone	Salary	Dept/Position/Duties	Reason for Leaving
From				
To				
Month and Year	Employer: Name, Address & Phone	Salary	Dept/Position/Duties	Reason for Leaving
From				
To				
Month and Year	Employer: Name, Address & Phone	Salary	Dept/Position/Duties	Reason for Leaving
From				
To				

Please read and initial each paragraph below. If there is any part of this page you do not understand, please ask the interviewer about it before signing

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement on this application or on any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initial: _____

I understand Denio's will thoroughly investigate my references, credit history, employment background, education and other matters related to my suitability for employment. Further, I will fully assist and cooperate with Denio's in the effort to obtain this information by signing a Request, Authorization, Consent and Release of Information Form, which includes a Release from Liability for Disclosure of Information.

Initial: _____

If hired, I agree to submit to a controlled substances screening and a physical examination at Denio's sole discretion and by Denio's designated medical practitioner.

Initial: _____

I understand that nothing contained in the application or conveyed to me during any interview which may be granted, is intended to create an employment contract, implied or explicit, between me and Denio's. In addition, I understand and agree that if I am employed, my employment relationship with Denio's is strictly voluntary and at our mutual will. I understand that if employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself or Denio's and that no promises or representations contrary to the foregoing are binding on Denio's unless made in writing and signed by the President and myself.

Initial: _____

Furthermore, if employed, I agree that any dispute arising out of the termination of our employment relationship shall be resolved pursuant to mandatory binding arbitration at the written request of either Denio's or myself. This agreement provides that such arbitration shall comply with and be governed by the Federal Arbitration Act that any arbitration awarded arising from such dispute shall be limited to back pay.

Initial: _____

I understand and agree that any future changes in my title, duties, compensations, working conditions, and or Denio's benefits, policies and procedures will not alter our at-will and arbitration agreements.

Initial: _____

I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

Initial: _____

In the event my position requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and I consent to Denio's obtaining a copy of my official driving record, and I will provide proof of insurance. I understand that any offer of employment is contingent on my ability to be covered by Denio's auto insurance, if required for my position.

Initial: _____

I understand that there are no guaranteed hours. Additionally, scheduled hours may fluctuate due to the level of business and changes in weather.

Initial: _____

My signature below certifies that I have read and understand these complete pages, and agree to the terms and conditions outlined in this document.

Applicant Signature: _____ Date: _____ / _____ / _____

DO NOT WRITE BELOW THIS LINE

Interviewed By: _____ Date: _____ / _____ / _____

Notes: _____

Date of hire _____
First day worked _____
Department _____
Pay rate _____

AUTHORIZATION, CONSENT and RELEASE of INFORMATION
RELEASE FROM LIABILITY for DISCLOSURE of INFORMATION FORM

I hereby authorize Denio's to thoroughly investigate my references, employment background, credit history, education and other matters related to my suitability for employment. Further, I authorize my current and former employers to disclose to the company any and all letters, reports and/or other information pertaining to my employment with them.

I hereby release Denio's, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

In accordance with California Law AB1655, I understand I will receive a copy of any background information obtained.

My signature below authorizes any request; consents to release of information; and releases from liability for any disclosure as stated above.

Applicants Signature _____ Date _____