



MILLER'S FOOD MARKET

3075 Manchester Road, Manchester, MD 21102 | (410) 374-4545

Dear Applicant:

Thanks for your interest in employment with Miller's Food Market.

Please fill out this application and return to the store.

Sincerely,

Miller's Food Market



Application for Employment

Miller's Food Market is an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any category protected by applicable federal, state, or local laws.

Name: _____ Date: _____

Address: _____

City, State Zip Code: _____

How long have you lived at this address? _____

Telephone Number: _____ Email Address: _____

Are you 18 years of age or older?

Yes No

Are you either a U.S. citizen or an alien authorized to work in the U.S.?

Yes No

Position Desired

Position: _____ Start date available: _____

Desired salary/hourly rate: \$ _____

Do you prefer: Full-time Part-time If part-time, hours per week desired: _____

Hours you are available to work: _____

Days of week you are available to work: _____

Are you able to work: Weekends?

Holidays?

Evenings?

Overtime?

How did you learn about this opening? _____

Education

Please list names and locations of school

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University/Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education, training or special skills:		

Work Experience

Please list all previous employment, beginning with the most recent. If you need more room, you may attach another sheet of paper.			
Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Compensation:		Final Compensation:	
Employer:		Address:	
From	To	Position Held:	Reason for Leaving:
Supervisor's Name & Title:			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:			
Starting Compensation:		Final Compensation:	

References

Identify three persons who we may contact that could provide a reference (work, volunteer and/or personal). Do not list relatives.

Name: _____ Phone Number: _____ Email: _____

Position and Company: _____ Years Known: _____

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Position and Company: _____ Years Known: _____

Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands or liabilities arising out of or in any way related to such inquiry or disclosure.

If hired by Miller's Food Market, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this company. I also understand that Miller's Food Market employs only individuals who are legally eligible to work in the United States.

Miller's Food Market is an at-will employer as allowed by applicable state law. This means that regardless of any provision in this application, if hired, the company or I may terminate the employment relationship at any time, for any reason, with or without cause or notice. Nothing in this application or in any document or statement, written or oral, shall limit the right to terminate employment at-will. No officer, employee or representative of the company is authorized to enter into an agreement- express or implied- with me or any applicant for employment for a specified period of time unless such an agreement is in a written contract signed by the president of the company.

If hired by Miller's Food Market, I agree to conform to the rules and regulations of the company, and I understand that the company has complete discretion to modify such rules and regulations at any time, except that it will not modify its policy of employment at-will.

Candidate's Signature

Date

Under Maryland law, an employer may not require or demand, as a condition of employment, prospective employment, or continued employment, that an individual submit to or take a lie detector, polygraph, or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100.

I have read and understand the above statement.

Applicant Signature: _____ Date: _____