



WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, CREED, COLOR, MARITAL STATUS, SEX, RELIGION, NATIONAL ORIGIN, CLASS ORIGIN, NATIONALITY, AGE, PHYSICAL OR MENTAL DISABILITY, MILITARY STATUS, GENDER IDENTITY OR SEXUAL ORIENTATION.

APPLICANT INFORMATION									
Last Name			First			M.I.		Date	
Street Address					Apartment/Unit #				
City			State			ZIP			
Phone			E-mail Address						
Date Available			Social Security No.			Desired Salary			
Position Applied for									
Are you a citizen of the United States?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				
Have you ever been convicted of a felony within the last 7 years?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				
Are you physically or otherwise unable to perform the duties of the job for which you are applying?			YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				

EDUCATION									
High School			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			

REFERENCES			
<i>Please list three references who are not related to you and are not previous employers.</i>			
Full Name		Relationship	
Phone			
Full Name		Relationship	
Phone			
Full Name		Relationship	
Phone			

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

SPECIAL TRADE

List any licenses, certificates or special training.

LANGUAGE

Indicate any foreign languages you can speak, read and/or write fluently

Speak

Read

Write

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I also understand that any offer of employment is contingent on my successful completion of a pre-employment physical examination. I understand, also that I am required to abide by all rules and regulations of the employer

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature

Date

NOTIFICATION OF AND AUTHORIZATION FOR PROCUREMENT OF CONSUMER REPORT

In conjunction with my application for employment (including contract and volunteer services) with you, my prospective employer, I understand that you may hire CyberChek, LLC to obtain "Consumer Reports" about me as defined in the Fair Credit Reporting Act (FCRA). These "Consumer Reports" may include, but are not limited to information concerning my employment history, credentials, motor vehicle record, credit history, education background, and criminal record.

I understand that you may rely on any or all of the above referenced information in determining whether to extend an offer of employment to me. If you contemplate making an adverse employment-related decision that will affect me based, in whole or in part, upon a "Consumer Report" obtained from CyberChek, LLC, I will be provided with a pre-adverse action disclosure, as well as a copy of the "Consumer Report" and a written summary of my "Consumer Rights" under the FCRA before you finalize that decision.

I have read the above disclosure and I hereby authorize CyberChek, LLC or its authorized agents to obtain the above referenced information about me. I also authorize all agencies, bureaus, employers, information service organizations and individuals to provide any of the above referenced knowledge or information they have concerning me. If I am hired, this authorization shall remain on file and shall serve as an ongoing authorization to obtain "Consumer Reports" about me from CyberChek, LLC at any time during my employment with you. A photocopy or facsimile of this authorization shall be as valid as the original.

Signature: _____

Printed Name: _____

Date: _____

APPLICANT INFORMATION:

_____ PRINT Last Name	_____ PRINT First Name	_____ Middle Initial
__ / __ / __ Date of Birth (For Identification Purposes Only)	_____ Social Security Number	
_____ Driver's License Number		_____ State Issued
NAME as it appears on Driver's License or State ID _____		
Other LEGAL names used within past seven (7) years _____		
Current Address - Street _____ City _____ State _____ Zip _____		
List all previous addresses for past seven (7) years. (Use separate page if necessary)		
Previous Address _____	City _____	State _____ Zip _____
Previous Address _____	City _____	State _____ Zip _____
Previous Address _____	City _____	State _____ Zip _____
Previous Address _____	City _____	State _____ Zip _____
Previous Address _____	City _____	State _____ Zip _____
Previous Address _____	City _____	State _____ Zip _____

EMPLOYER INFORMATION:

Company Name: Food Bank for the Heartland	Contact Person: Ashlei Spivey
Phone Number: (402) 905-4801	Email: aspivey@foodbankheartland.org
SERVICES REQUESTED:	
Criminal History	
Driver's History	

CYBERCHEK, LLC
PO Box 45087
Omaha NE 68145
(402) 614-1515
Fax (402) 758-9307