



---

**EDUCATION**

---

School	Name & Location	Course	# of Yrs.	Did you Graduate?	Degree/Diploma
Graduate				Yes No	
College				Yes No	
Business/Trade/Tech.				Yes No	
High School				Yes No	
Elementary				Yes No	

If currently a student, on what date will you return to school and no longer be available for work?  
Date: \_\_\_\_\_

---

**EMPLOYMENT EXPERIENCE**

---

Company Name	( )	Telephone
Address		
From: _____	To: _____	Start _____ Last _____
Employed (State month & year)		Weekly Pay

Name of Supervisor

State Job Title & Describe Work

Reason for Leaving

---

Company Name	( )	Telephone
Address		
From: _____	To: _____	Start _____ Last _____
Employed (State month & year)		Weekly Pay

Name of Supervisor

State Job Title & Describe Work

Reason for Leaving

\_\_\_\_\_  
Company Name (     )  
Telephone

\_\_\_\_\_  
Address

From: \_\_\_\_\_ To: \_\_\_\_\_ Start \_\_\_\_\_ Last \_\_\_\_\_  
Employed (State month & year) Weekly Pay

\_\_\_\_\_  
Name of Supervisor

\_\_\_\_\_  
State Job Title & Describe Work

\_\_\_\_\_  
Reason for Leaving

**REFERENCES**

Give name, address, and telephone member of three references who are not related to you and are not previous employees:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

I understand and agree that:

- 1) Any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal of, or if employed, termination from employment.
- 2) It is my understanding that Nutrition, Inc. will make a thorough investigation of my entire work history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving or receiving of any information requested and I release from liability any person giving or receiving such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired, or if hired, may subject me to immediate dismissal.

I have read and understand the above:

I verify that the facts set forth in my Application for Employment are true and complete.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_