



Cub Foods Minnetonka Employment Application

The Civil Rights Act of 1964, as amended, prohibits discrimination in employment because of race, color, sex, religion, or national origin. The Age Discrimination in Employment Act of 1967, as amended, prohibits discrimination because of age. Various state laws prohibit some of the above as well as other types of discrimination. As an equal Opportunity Employer, Cub Foods intends to comply fully with all applicable employment laws.

Personal Information

Name _____ Phone _____ Date _____

Address _____ City _____ State _____ Zip Code _____

Store Position _____ Previous Cub Employment (Yes/No) _____ Where _____

Earnings expected (per hour) _____ If you are under age 18 years old, please state age _____

Referred to CUB FOODS from what source _____

Are you employed now? YES / NO _____ This Application is for: PART TIME _____ FULL TIME _____

If temporary, please note dates: _____

Please state the names and relationship of relatives working at CUB FOODS:

NAME: _____ RELATIONSHIP: _____ STORE: _____

NAME: _____ RELATIONSHIP: _____ STORE: _____

List your current availability: **What hours are you AVAILABLE?**

	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
FROM time							
TO time							

EDUCATION

Specify highest grade completed _____ Type of School _____

High School attended _____ Date last attended _____

Post High School attended _____ Dates _____

Diploma-degrees-certificates achieved _____

Skills acquired from learning experiences _____

Do you intend to return to school? YES / NO _____ Type of School _____

Dates _____ Times _____

EMPLOYMENT HISTORY

Present or Most Recent Employer

Name of company	type of business	phone number	
Street address	city	state	zip
Employment dates (month & year)	from	to	
Supervisor's name	title	phone number	
Your title of position	skills needed or acquired in position		
Reason for leaving			
May we contact this employer?	YES	NO	Final Salary

Next Previous Employer

Name of company	type of business	phone number	
Street address	city	state	zip
Employment dates (month & year)	from	to	
Supervisor's name	title	phone number	
Your title of position	skills needed or acquired in position		
Reason for leaving			
May we contact this employer?	YES	NO	Final Salary

Give below names of two references not related to you who have known you for at least one year

NAME	ADDRESS	HOW ACQUAINTED	PHONE
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I authorized CUB FOODS to contact and/or verify my employment, references or any other background information.

Further, I hereby release from all liability or damages those individuals, corporations, or organizations who provide such information. It is the policy of CUB FOODS to check and verify information on the application.

It is understood that if my application is considered favorably, any false or misleading statement or information submitted on this application may result in **Immediate dismissal** without notice.

On entering the employ of CUB FOODS, I agree to be governed and abide by all rules and regulations of my employer and to perform satisfactorily such duties as may be assigned to me from time to time. I understand that my employment is for no definite or fixed period of time and that neither hours or work which may be assigned to me at any time nor any other act or circumstances shall constitute a guarantee of employment or as to daily or weekly straight time or overtime working hours; if any. I, further understand that if employment is offered to me by CUB FOODS, it will be on an at will basis and may be terminated at any time, by either party with or without cause. No representative of CUB FOODS has the authority to make contrary agreement.

I hereby certify the statements and information made in this application are, to the best of my knowledge, completely true and correct; and that I have read the above notice.

Signature_____ date:_____