

Herbal Planet
Application for Employment

Date: _____

Personal Information:

Name:	Social Security #:
Address:	Telephone #:
City: State: Zip:	Alternative Phone #:
What position are you applying for?	
Wage Requested:	Min/Max Number or hours you are available to work each week: (Example 25/40)

Please list your availability below: Herbal Planet Hours are M-F 9:00 - 7:00 & Sat 10:00 - 6:00

<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	<u>Saturday</u>
How many Saturdays are you able & willing to work per month?					
How long do you see yourself working at Herbal Planet?					
If hired, when would you be able to begin employment?					

Education:

High School:	Dates Attended:	GPA:
College:	Dates Attended:	GPA:
Other:	Dates Attended:	GPA:

Previous work experience:

Current or last place of employment:	Dates:	Wage:
Position/Responsibilities:	Reason for Leaving:	Reference Person: Phone Number:
Place of employment:	Dates:	Wage:
Position/Responsibilities:	Reason for Leaving:	Reference Person: Phone Number:
Place of employment:	Dates:	Wage:
Position/Responsibilities:	Reason for Leaving:	Reference Person: Phone Number:

May we contact your previous or current employers? (If no, please explain.)

How did you hear about the job opening?

Why are you interested in working for Herbal Planet?

What is the extent of your knowledge of natural foods and natural health?

What qualities/talents to you have that would be beneficial in this position?

Do you smoke:

Do you have any physical or mental conditions that could affect your ability to be in regular performance or attendance? (If yes, please explain.)

Do you have any responsibilities that would interfere with your job? (If yes, please explain.)

Have you ever been convicted of a felony? Explain:

Please tell us about yourself and your skills that you have that would contribute to the success of Herbal Planet:

Personal References: (Not related to you.)

Reference 1:	Relationship:	How long known:
Address:		Telephone #:
Reference 2:	Relationship	How long known:
Address:		Telephone #:
Reference 3:	Relationship:	How long known:
Address:		Telephone #:

I agree that any false statement in this application is sufficient reason for rejection of dismissal. I authorize investigation of all information in this application, unless indicated otherwise.

Applicant's Signature _____ Date: _____

Thank you for your interest in Herbal Planet. We appreciate your time in filling out this application.