



AVIFoodsystems.com

# INTERMITTENT EMPLOYMENT APPLICATION

**For use by Temporary Catering and Student applicants ONLY. Submit COMPLETED Application to the AVI Office.**

At AVI Foodsystems, Inc., we take pride in our attention to detail. This begins with each potential team member thoroughly completing each section of this application. This application must be personally signed or electronically acknowledged by the applicant.

**PLEASE PRINT NEATLY AND USE INK (if not being completed electronically).**

**DATE OF APPLICATION (Today's Date):** \_\_\_\_\_ **POSITION APPLIED FOR:** \_\_\_\_\_

Last Name ( )	First ( )	Middle	Last 4 digits of Social Security Number (Identification Purposes ONLY)
Telephone No.	Cell Phone No.	Email Address	

Present Address No.	Street	City	State	Zip Code	County
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Previous Address No.	Street	City	State	Zip Code	County
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Length of time at Present Address \_\_\_\_\_ Length of time at Previous Address \_\_\_\_\_ (You must list all residences in the past 7 years. Attach an additional sheet if necessary.)

Do you have the legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
If hired, can you provide evidence of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	If no, list your date of birth (except Utah applicants).

Available Start Date?	Desired wage?	Do you have any hobbies that would prevent you from working your regularly scheduled hours?			
		1. _____ 2. _____			

What times/days are you available to work?	<input type="checkbox"/> Sunday	<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday	<input type="checkbox"/> Friday	<input type="checkbox"/> Saturday
	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____

In the event of an emergency, who should be notified?  
 Name: \_\_\_\_\_ Place of Business: \_\_\_\_\_  
 TELEPHONE NO. HOME: ( ) \_\_\_\_\_ WORK: ( ) \_\_\_\_\_ CELL: ( ) \_\_\_\_\_

Do you use any tobacco products?  Yes  No The use of tobacco products will not necessarily disqualify you from the position for which you are applying. AVI Foodsystems, Inc. does not permit the use of tobacco products while on the job or on/in any property owned, leased or used by AVI Foodsystems, Inc.

How were you referred to AVI Foodsystems, Inc.? <input type="checkbox"/> Walk-In <input type="checkbox"/> Job Fair – Name: _____ <input type="checkbox"/> Flier <input type="checkbox"/> School – Name: _____ <input type="checkbox"/> AVI Team Member Name: _____ <input type="checkbox"/> Newspaper Name: _____ <input type="checkbox"/> Online – Website: _____ <input type="checkbox"/> Other – Explain: _____	List any friends and/or relatives working for AVI Foodsystems, Inc. Name: _____ Name: _____ Name: _____
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### A COMPLETE EMPLOYMENT HISTORY IS REQUIRED

Please provide your entire employment history listing all paid positions of employment that you have held, including part-time and summer work – starting with the most recent employment. In addition, please feel free to include as part of your employment history any work performed on a volunteer basis. List **entire** work history.  
*Please complete all questions for each employer.*

Have you ever been dismissed or asked to resign from any employer?  Yes  No If yes, please explain.

If not currently employed, explain reason for unemployment from last job until present?  
 (A period of unemployment will not prevent an applicant from employment with AVI)

### CURRENT/FORMER EMPLOYMENT (Begin with Most Recent Employment)

Date Month and Year	Employer Name & Address	Hours Worked per Week	Job Title Responsibilities and Duties	Supervisor Name Telephone Number	May we contact this Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain.
From			Job Title		
To			Responsibilities and Duties		
Please explain <u>in detail</u> reason for leaving or seeking employment:			Explain reason for period of unemployment between employers:		
From			Job Title		
To			Responsibilities and Duties		
Please explain <u>in detail</u> reason for leaving:			Explain reason for period of unemployment between employers:		

AVI Foodsystems, Inc. subscribes without reservation to all federal, state, and local statutes which prohibit discrimination against any applicant or team member on the basis of race, color, sex, religion, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws. AVI Foodsystems, Inc. also prohibits harassment of applicants and team members based on any of these protected categories. It is AVI Foodsystems, Inc.'s policy to comply with all applicable state and federal laws respecting consideration of unemployment status in making hiring decisions. Your answers to the questions in the application will be evaluated solely for the purpose of determining your qualifications to perform the job for which you are applying.

- (1) I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge and in accordance with the instructions in this application. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.
- (2) I recognize that this employment application is not an offer of employment. I agree that if I am hired by AVI Foodsystems, Inc., I will be an at-will team member, meaning that either AVI Foodsystems, Inc. or I may end the employment relationship at any time with or without cause or prior notice. I further understand and agree that, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by AVI Foodsystems, Inc.
- (3) I understand that AVI Foodsystems, Inc. may share the information contained in this application with other AVI Foodsystems, Inc. team members and/or clients for employment and administrative purposes and
- (4) I agree to undergo a pre-employment physical examination consistent with federal and state law, if required.
- (5) I agree to submit to legally permissible drug testing as part of AVI Foodsystems, Inc.'s employment process and if hired, throughout my employment to the extent permitted by federal, state and local law. Evidence of illicit drugs in my system may disqualify me from employment. If I do not meet the AVI Foodsystems, Inc.'s employment standards and/or those of the AVI Foodsystems, Inc.'s client, I could be subject to termination.
- (6) I understand that, if hired, I may not hold other employment or engage in any other activities that create a conflict of interest with AVI Foodsystems, Inc. unless I have been given written permission by AVI Foodsystems, Inc.'s Human Resources Department.
- (7) I understand that if I am offered employment, I may be required to sign a non-solicitation, non-disclosure and non-compete agreement, as a condition of employment.
- (8) I agree that any claim or lawsuit relating to my service with AVI Foodsystems, Inc. must be filed no later than one year after the date of the employment action that is the subject of the claim or lawsuit. I waive any longer statute of limitations, and I understand that my agreement may reduce the amount of time within which I would otherwise be permitted to file a claim or lawsuit under the law.
- (9) **Massachusetts Applicants:** I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between AVI Foodsystems, Inc. and me concerning the topics addressed herein, and supersedes any prior inconsistent understandings between AVI Foodsystems, Inc. and me on such issues.

By providing my written signature below, I certify that this application was completed by me, and all entries on it and information in it are true and complete to the best of my knowledge. If this application is submitted electronically, by checking the "I Accept" box and typing my legal name for "Applicant's Signature", I certify that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge, and I further understand and agree to the use of an electronic method of signature to demonstrate my acceptance of the terms and conditions of this employment application.

I Accept \_\_\_\_\_  
 Applicant's Signature Date

**Preparer and/or Translator Certification:** To be completed and signed if the application is prepared by a person other than the applicant. By providing my written signature below, I attest that I have assisted in the completion of this application and that to the best of my knowledge the information is true and correct. If this application is submitted electronically, by checking the "I Accept" box and typing my legal name for "Preparer's Signature", I attest that I have assisted in the completion of this application and that to the best of my knowledge the information is true and correct, and I further understand and agree to the use of an electronic method of signature to demonstrate my acceptance of the terms and conditions of this employment application.

I Accept \_\_\_\_\_  
 Preparer's Signature Date