

APPLICATION FOR EMPLOYMENT

Store Location

Applications are considered for positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status. Moser's Foods, Show Me Oil Company is an Equal Opportunity Employer.

		(	ase Print)			
Date:	Social Security	/:	Driver's License:		State:	
Full Legal Name				( . 1 11 )		
	(last)	(maiden if applicable)	(first)	(middle)		
Address(stre	eet)	(city)	(state	) (zip	code)	
Prior Address						
	(street)	(city)	(state	) (zip	code)	
Phone: Home		Cell	Alternat	ive Numbers		
		security number other than	the one on this application?	□ Yes □ N	0	
	A	Answer Every Question	n to the Best of Your	Ability		
Position for whic	h you are applying:		Date availabl	e for work:		
		h Moser's Foods, Show Me				
		Position: oser's Foods, Show Me Oil		Yes	No □	
	• • •	oser's roods, snow me On	1 +	Yes	No	
	8 years of age?					
Have you been di	ischarged from or force	1, , , , , , , , , , , , , , , , , , ,		0		
nave yea eeen a	ischarged from of foree	to resign from any position	$n? \qquad \Box \ Yes \qquad \Box \ No  W$	here?		
	ischarged from of force	• • • •	n? 🗆 Yes 🗆 No Wi	nere?		
		Milita	ry Service			
Have you ever se	rved in the United Stat	Milita es Armed Forces?	ry Service			
Have you ever se		Milita	Branch:			
Have you ever se	rved in the United Stat	Milita	Branch: ucation			
Have you ever se Special Duties an Graduated	rved in the United Stat	Milita es Armed Forces? Ed	Branch: ucation	Dates of Service: # of Years	Major or	
Have you ever se Special Duties an Graduated	rved in the United Stat	Milita es Armed Forces? Ed	Branch: ucation	Dates of Service: # of Years	Major or	
Have you ever se Special Duties an Graduated	rved in the United Stat ad Skills: ) Name of School High School	Milita es Armed Forces? Ed	Branch: ucation	Dates of Service: # of Years	Major or	
Have you ever se Special Duties an Graduated	rved in the United Stat ad Skills: Name of School High School College	Milita es Armed Forces? Ed	Branch: ucation	Dates of Service: # of Years	Major or	

(A "Yes" answer will not necessarily disqualify an applicant from employment) *Attach additional information on a blank sheet of paper if needed.* Please list any and **all** convictions.

Nature of Offense	City, State & County	Date of Conviction

## **Employment History**

Please note our application will <u>NOT</u> be considered unless <u>every</u> question is answered. You may attach your resume, however, all required information must be written on this form. List your previous employment. Begin with your present employer.

Company Nama	Position Held	Dates (Month and Vean)	
Company Name	rosition neiu	Dates (Month and Year) From:	То:
		F FOIII:	10:
Company Address	Supervisor's Name	Salary	
1 2	1	Beginning:	Ending:
		8 8	8
City, State, Zip	Describe Duties:		
Phone Number	Reason for Leaving:		
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Company Name	Position Held	Dates (Month and Year)	
		From:	To:
Company Address	Supervisor's Name	Salary	
Company Address	Supervisor s tvame	Beginning:	Ending:
		beginning.	Enung.
City, State, Zip	Describe Duties:		
Phone Number	Reason for Leaving:		
r none Number	Reason for Leaving.		
Company Name	Position Held	Dates (Month and Year)	
		From:	To:
		6.1	
Company Address	Supervisor's Name	Salary	
		Beginning:	Ending:
City, State, Zip	Describe Duties:		
- · · · · · · · · · · · · · · · · · · ·			
Phone Number	<b>Reason for Leaving:</b>		

## **Application Statement**

This application statement shall constitute a part of any employment application I may submit to the Company. I understand that I will be subject to dismissal if anything is found to be false. I understand that nothing contained in the employment or in the granting of any interview is intended to create an employment contract between the Company and myself for either employment or for the providing of any benefit. I understand that no promises regarding employment have been made to me. I understand that if I am employed by the Company, my employment will be for no fixed term, and that the Company without prior notice may terminate my employment at any time for any reason. This understanding cannot be changed except in writing by an authorized Company official. The Company's rights as explained in this form shall not be modified or limited by an oral representation by any Company representative, or by any written provisions contained in any Company literature, newspaper or other advertisement, policy manual, or employment guidelines.

Date

Signature of Applicant

## FAIR CREDIT REPORTING ACT - BACKGROUND DISCLOSURE AND AUTHORIZATION

As an employment application or current employee of Moser's Foods, Show Me Oil Company, you are a consumer with rights under the Fair Credit Reporting Act ("FCRA"). A "Summary of Your Rights Under the Fair Credit Reporting Act" issued by the Consumer Financial Protection Bureau is attached. You should read this form and the Summary carefully.

When considering your employment application, making a decision whether to offer employment, deciding to continue employment (if hired), or making other employment decisions directly affecting you, Moser's Foods, Show Me Oil Company may obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency ("CRA"). If an investigative consumer report is requested, you will receive an additional disclosure and may request additional information about the nature and scope of such investigation.

Moser's Foods, Show Me Oil Company generally conducts its own background checks and obtains such information directly. Information that may be obtained includes without limit, SSN verification, residential history, credit report, criminal/conviction and driving history, academic experience, job performance, attendance and disciplinary history, and verification of employment experience. Such information may be obtained form private and/or public records or sources including, without limit, sources identified in your application, education or financial institutions, law enforcement or government agencies, divisions of motor vehicles, social networking or internet sites, and consumer reporting agencies.

## AUTHORIZATION

By signing below, you (1) acknowledge you have carefully read this Background Disclosure and Authorization and understand that you have rights under the FCRA including those discussed above; (2) without reservation, voluntarily authorize Moser's Foods, Show Me Oil Company to obtain consumer reports or investigative consumer reports about you from a consumer reporting agency, and (3) voluntarily consent to the release of such consumer reports or investigative consumer reports to Moser's Foods, Show Me Oil Company and to Moser's Foods, Show Me Oil Company considering this information when making decisions regarding your application or employment.

By signing below, you further (4) without reservation, voluntarily authorized and request any present or former employer, education or financial institution, law enforcement or government agency, division of motor vehicles, consumer reporting agency or other person or agencies having knowledge about you to furnish Moser's Foods, Show Me Oil Company with any and all background information about you in their possession so your employment qualifications may be evaluated and/or reassessed; and, (5) voluntarily authorize Moser's Foods, Show Me Oil Company to request and obtain background information about you from any source.

By signing, you further agree that a photocopy, electronic copy or fax of this signed authorization will be valid as the original for any report or information that may be requested.

Signature:	Date:		
Last Name:	First Name:	Middle:	
SSN:	Date of Birth (for ID pur	poses only)	
Present Address:			
City/State/Zip:			