

Application For Employment

Equal access to programs, service and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. Please submit your application via email to Human Resources at HR@dutchvalleyfoods.com



The Dutch Valley Companies
7615 Lancaster Ave.
Myerstown, PA 17067
Phone: 717.933.5466
HR Fax: 717.740.2137
www.dutchvalleyfoods.com

Personal Information- Please print or type

Name

Address	City	State	Zip
Phone number	Are you legally eligible to work in the US? Yes No Do you now, or will you in the future, require sponsorship for employment visa status (e.g., H-1B visa status, etc.) to work legally for our Company in the United States? Yes No		
Email address	If you are under 18 years of age, can you provide required proof of your eligibility to work? (If over 18 leave blank) Yes <input type="checkbox"/> No <input type="checkbox"/>		

Have you been convicted of or plead guilty to a crime within the last 7 years? **Conviction will not necessarily disqualify an applicant from employment**

Yes ☐ No ☐

If Yes, Please explain

Position

Position you are applying for	Have you ever been employed with us before?	Available Start Date
Employment desired <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Seasonal/Temporary <input type="checkbox"/> 1st Shift <input type="checkbox"/> 2nd Shift <input type="checkbox"/> 3rd/Any Shift		
How did you hear about us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Indeed <input type="checkbox"/> Billboard/Sign <input type="checkbox"/> Social Media <input type="checkbox"/> Referral <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Employee <input type="checkbox"/> Other		

School name	Location	# of years	Degree received	Major

References (business and professional only)

Name	Title	Company	Phone

Employment History

Please complete entirely

Current/Most Recent Employer	Job title	Start date
Address	Work Phone	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for Leaving	Starting pay rate	Ending pay rate
Previous Employer	Job title	Start date
Address	Work Phone	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for Leaving	Starting pay rate	Ending pay rate
Previous Employer	Job title	Start date
Address	Work Phone	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>
Reason for Leaving	Starting pay rate	Ending pay rate

Skills & Qualifications- Summarize any training, skills, licenses, and /or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Additional Information- State any additional information you feel may be helpful to us in considering your application.

Applicant's Statement

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other person, corporations or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law. If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I AGREE TO SUBMIT TO CONTROLLED SUBSTANCE TESTING, AT THE REQUEST OF THE EMPLOYER. REFUSAL TO DO SO WILL END THE EMPLOYMENT PROCESS. AN APPLICANT MUST TEST NEGATIVE TO BE FURTHER CONSIDERED FOR EMPLOYMENT.

I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Name (please print)	Signature
Date	