

3850 South Nova Road
 Port Orange, FL 32127
 862 Saxon Boulevard
 Orange City, FL 32763

Phone: 386-763-7046
 Fax: 386-763-7048
 Phone: 775-7002
 Fax: 386-775-2931



APPLICATION FOR EMPLOYMENT

Date _____

Personal Information

Last	First	MI	SSN#	Email	
Street Address		City	ST	Zip	Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you have knowledge of vitamins and health supplements?	
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain:			
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		War	
What position are you applying for? Full Time ___ Part Time ___ Temporary ___		What days are you available to work? Mon ___ Tues ___ Wed ___ Thur ___ Fri ___ Sat ___ Sun ___ What hours are you available to work?			
Date Available	Expected Salary	How did you hear about us?			

Prior Work Experience

	Current or Most Recent	Prior	Prior
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position/Job Title			
Pay			
Reason for Leaving			
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Education

Name/Location	Last Year Complete	Degree	Major or Emphasis
High School	9 10 11 12		
College/University	1 2 3 4		
Trade School			
Other			
List any applicable special skills, training or proficiencies.			

Personal References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

Signature _____

Date _____