<u>Highland Orchards, Inc. 1000 Marshallton Thorndale Road, West Chester, Pa 19380</u> <u>Phone (610) 269-3494</u>

Application for Employment

(pre-employment questionnaire)

Various Federal, State, and Local laws prohibit discrimination based on Race, Color, Gender, Gender Identitiy, Sexual Orientaition, Religion, pregnancy, childbirth and related medical conditions, national Origin, Ancestry, Age (as prescribed by law.) Handicap or Marital Status, veteran status, or uniform service member status. Highland Orchards,Inc. is an equal opportunity employer and your response to any question will not be used as a basis for discrimination, but wil be judged on its relevance to the postition you are seeking.

Applicant (Your name) Last/First/Middle Address City/State/Zip Contact phone no. Person to notify in case of emergency				Basic Info: Social Security no. ARE YOU 18 YEARS OR OLDER? _YES _NO If no, give date of birth and age// age If you are not 18 years, are you prepared to provide working papers? _YES _NO			
Emergency telephone no				Do you have a legal right and necessary papers to work in the United States? YES NO Email address			
Position In	fo:			•			
Position you a	re applying for_					pected \$	
When can you start Other types of work you are interested in:							1
	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Summer (From-Until) (5/23-8/31)							
Fall (From-Until) (9/1-11/30)							
		able to work? the times, that v		affect your availa	ability such as v	acations, sports	, music, etc.
day available?	?					nts: What is your	
Education							
Are you in sch		work during sc			e) level have yo	ou completed	
		available?					
-	-	school: When			nievements:		
General							
	a valid driver's li	cense? YES	NO #		State	Class	
Do you have a	a claan driving r	acord for the lac	t 3 veare2 TVI	ES NO If no	nleace list violat	ione	

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Have you, in the past 5 years, been	convicted of a felony? YES	□NO If yes, please provide an	explanation
What type of equipment can you op	erate? (Be specific)		
Special skills or talents: Activities (civic, athletic, etc.) Other comments:			
For Farm Market Applicants	s Only:		
Are you able to work at least one da	ay per weekend? □YES □NO ַ		
Are you prepared to work continuall	y for up to 5 hours without a bre	eak? □YES □NO	
Are you prepared to lift up to 50 lbs			
Have you, in the last year had any disea	ases transferable through handling	food, such as hepatitis or salmone	la? □YES □NO
References			
name/address		Phone no.	Relationship
name/address		Phone no.	Relationship
name/address		Phone no.	Relationship
Employment History Please include all employers with w	1		ional paper if needed.
Employer's name, address & phone no.	Dates Employed From:	Position Held	
	_ To: Pay Rate	Name & Title of Superviso	r
	StartingFinal		
Employer's name, address & phone no.	Dates Employed From:	Position Held	
	_ To:	Name & Title of Superviso	r
	_ Pay Rate Starting Final		
L Are you employed now?			
Were you ever discharged by any e Have you ever worked for Highland			
Which of these jobs did you like bes What do you like most about the job	•		
"I certify that the facts contained in this application shall be groun to give you any and all information concernir liability for any damage that may result from may, regardless of the date of payment of may Date	nds for dismissal. I authorize investigation ng my previous employment and any pe furnishing same to you. I understand an	on of all statements contained herein an ertinent information they may have, and and agree that, if hired, my employment in my time without prior notice and without	d the references listed above release all parties from all s for no definite period and