POSITION APPLYING FOR:



Employment ApplicationCHANNEL ONE REGIONAL FOOD BANK

131 35th Street SE * Rochester, MN 55904 Phone (507)287-2350 * FAX (507)287-2351

www.helpingfeedpeople.org

Channel One Regional Food Bank is an Equal Opportunity employer, dedicated to a policy of non-discrimination in employment on any basis, including race, color, sex (including pregnancy, sexual orientation, or gender identity), age, religion, disability, or national origin. A separate application must be completed for each position.

After completing the application, you may submit it electronically to lindalovik@channel-one.org
or you may print it off and mail to: Human Resources Director
Channel One Regional Food Bank, 131 35th Street SE, Rochester, MN 55904

DATE:

PERSONAL INFORMATION						
LAST NAME:		FIRST NAME:			M.I.:	
ADDRESS:		CITY:		STATE:	ZIP CODE:	
TELEPHONE:	PHONE: E-MAIL:					
EDUCATION						
HAVE YOU GRADUATED FROM HIGH SCHOOL OR RECEIVED A GED? YES NO						
NAME OF HIGH SCHOOL ATTENDED:			LC	OCATION:		
NAME OF COLLEGE, TECHNICAL, PROFESSION	AL,	NO. OF YEARS	DEGREE OR (CERTIFICATE	MAJOR/MIN	OR OR
TRADE, OR OTHER SCHOOL ATTENDED		COMPLETED	OBTA	INED	SUBJECT STU	JDIED

EMPLOYMENT HISTORY

List complete employment history within the last five years. Start with present or most recent employer.

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	EMPLOYER NAME	TELEPHONE	MAY WE C	ONTACT?	FULL TIME	
			YES	NO		
			TES	NU	PART TIME	
	ADDRESS		EMPLOYMEN	IT DATES		
			FROM	Т	0	
	SUPERVISOR'S NAME AND TITLE		YOUR JOB TI	ΓLE		
1						
	REASON FOR LEAVING OR DESIRE TO LEAVE		I			
	DESCRIPTION OF MAJOR DUTIES					
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	EMPLOYER NAME	TELEPHONE	MAY WE C	ONTACT?	FULL TIME	
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	ADDRESS	<u> </u>	EMPLOYMEN	IT DATES		
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	ADDRESS		EMPLOYMEN	IT DATES		
			FROM	Т	0	
	SUPERVISOR'S NAME AND TITLE		YOUR JOB TITLE			
	SOI ERVISORS IN THE TITLE		1001130211			
3						
	REASON FOR LEAVING OR DESIRE TO LEAVE					
	REASON FOR LEAVING OR DESIRE TO LEAVE					
	DESCRIPTION OF MAJOR DUTIES					

REFERENCES

List below three persons not related to you, whom you have known at least one year.

	NAME		RELATIONSHIP
1	COMPANY		TELEPHONE
	ADDRESS	STATE	ZIP CODE
	ADDICESS	JIAIL	ZIF CODE
	NAME		RELATIONSHIP
2	COMPANY		TELEPHONE
_			
	ADDRESS	STATE	ZIP CODE
	NAME		RELATIONSHIP
	COMPANY		TELEPHONE
3			
	ADDRESS	STATE	ZIP CODE

AUTHORIZATION

I certify that the facts set forth in this employment application are true and complete to the best of my knowledge. I understand that falsified statements on this application in any detail shall be considered sufficient cause for disqualification from further consideration for hire or for dismissal. I further understand that certain positions requiring professional licenses will require extensive verification of licensure and qualifications.

I authorize Channel One Inc. to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation, credit agency, or government agency to give Channel One information they may have regarding me. In consideration of Channel One's review of this application, I release Channel One and all providers of information from any liability as a result of furnishing or receiving this information.

I further agree that, if employed, I will conform my conduct to Channel One's rules and regulations and understand that I have the right to terminate my employment at any time and that Channel One has the same right. I understand that Channel One is an at-will employer and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated at any time with or without cause and without any previous notice.

I understand that nothing contained in this application or in granting of an interview, creates a contract between Channel One and myself for either employment or for the providing of any benefit. I also understand that any employment manuals or handbooks that may be distributed to me during the course of my employment shall not be construed as a contract, and further, that such manuals or handbooks may be modified at any time at the sole discretion of the Board of Directors and/or management of Channel One Inc.

SIGNATURE:	DATE