



*Foodservice Solutions with a Local Flavor*

## **APPLICATION FOR EMPLOYMENT**

95 Haverhill Road

P.O. Box 897

Amesbury, MA 01913

***Equal Opportunity/Affirmative Action Employer***

To Applicant:

Shaheen Bros., Inc. is an Equal Employment Opportunity/Affirmative Action Employer. The Company adheres to a policy of making all employment decisions without regard to race, color, sex, religion, national origin, age, disability, veteran status, citizenship or any other protected classification which may be applicable under the law of the particular state or locality in which you are applying for employment with the Company. Please complete and sign your application form. Failure to complete and/or sign the application may result in the application not being considered. This application will remain active for a period of 90 days after the date of application or the position is filled whichever comes first.

### **Personal Data**

Date of Application: \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (MI) \_\_\_\_\_

Social Security # (or other identification # if no Social Security #): \_\_\_\_\_

Current Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

E-Mail Address (optional): \_\_\_\_\_

### **If less than 3 years at previous address:**

Address: (Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

List any other name under which you have worked or you were enrolled in school to assist us in checking your references and background: \_\_\_\_\_

**Please circle one of the following answers**

- If hired, will you be able to provide proof that you are eligible to work in the United States? **Yes or No**
- If hired, will you now or in the future require the Company to provide sponsorship to be eligible (or remain eligible) for employment in the U.S. (e.g., H-1B visa status)? **Yes or No**
- Are you under 18 years of age? **Yes or No**

What job are you applying for? (you must specify in order for you application to be processed):

\_\_\_\_\_

Rate of Pay expected: \$ \_\_\_\_\_ per \_\_\_\_\_

If hired, on what date will you be available to work? \_\_\_\_\_

**Employment Experience**

List each job held in the past 10 years. Start with your present or last job. Please account for any time lapses during which you were not employed, except for time lapses resulting from a medical condition or other disability. Include military service assignments. You may also include volunteer experience if you desire. If you need additional space, or if you wish to explain in detail the circumstances of your departure from a previous employer, please attach a separate sheet. We may contact the supervisors listed below.

**Note for commercial vehicle driver positions:** You must include any and all commercial driving experience in the past 10 years.

**Note regarding military service:** A dishonorable discharge is not an absolute bar to employment. Other factors will affect a final decision. Do not include information regarding service in a foreign country.

Dates: (Month/Year) \_\_\_\_\_ to \_\_\_\_\_

Name and Address of Employer: (Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Rate of Pay: (Start) \_\_\_\_\_ (Finish) \_\_\_\_\_

Supervisor's Name/Title/Phone Number: (Name) \_\_\_\_\_  
(Title) \_\_\_\_\_ (Phone Number) (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Describe you position and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

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Dates: (Month/Year) \_\_\_\_\_ to \_\_\_\_\_

Name and Address of Employer: (Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Rate of Pay: (Start) \_\_\_\_\_ (Finish) \_\_\_\_\_

Supervisor's Name/Title/ Phone Number: (Name) \_\_\_\_\_  
(Title) \_\_\_\_\_ (Phone Number) (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Describe your position and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

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Dates: (Month/Year) \_\_\_\_\_ to \_\_\_\_\_

Name and Address of Employer: (Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Rate of Pay: (Start) \_\_\_\_\_ (Finish) \_\_\_\_\_

Supervisor's Name/Title/ Phone Number: (Name) \_\_\_\_\_  
(Title) \_\_\_\_\_ (Phone Number) (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_

Describe your position and responsibilities: \_\_\_\_\_  
\_\_\_\_\_

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Dates: (Month/Year) \_\_\_\_\_ to \_\_\_\_\_

Name and Address of Employer: (Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Rate of Pay: (Start) \_\_\_\_\_ (Finish) \_\_\_\_\_

Supervisor's Name/ Title/ Phone Number: (Name) \_\_\_\_\_

(Title) \_\_\_\_\_ (Phone Number) (\_\_\_\_) \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe you position and responsibilities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Have you entered into any agreements with any former employer or other entity (for example, an agreement not to compete or confidentiality agreement) that may impact your ability to work for Shaheen Bros. Inc.? (Please circle one) **Yes or No**

**If you answered yes please provide a copy of the agreement(s).**

Describe the skills you have that would be relevant to the job you are applying for:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please circle one of the following answers:**

Have you ever been terminated for cause (i.e. violation of company policy)? **Yes or No**

If you answered yes please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever applied for any positions with Shaheen Bros. Inc.? **Yes or No**

If yes, when and what position? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you work on a temporary basis? **Yes or No**

Would you work at night? **Yes or No**

Can you travel if required by the position? **Yes or No**

Will you work overtime if needed? **Yes or No**

Do you want to work full time or part-time? \_\_\_\_\_ Specify amount if part-time:  
\_\_\_\_\_

Please list any certifications or award you currently have: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Educational Background**

**High School** (Name) \_\_\_\_\_ Completed all four years: **Yes or No**

**Business or Trade School** (Name) \_\_\_\_\_

**College** (Name) \_\_\_\_\_ (Degree) \_\_\_\_\_

**Post Graduate** (Name) \_\_\_\_\_ (Degree) \_\_\_\_\_

**Computer Skills:**

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**References**

**List three professional or personal references (not relatives) giving name, address, occupation, phone and relationship.**

(Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_  
(Occupation) \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_  
(Relationship) \_\_\_\_\_

(Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_  
(Occupation) \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_  
(Relationship) \_\_\_\_\_

(Name) \_\_\_\_\_  
(Street) \_\_\_\_\_ (City) \_\_\_\_\_  
(State) \_\_\_\_\_ (Country) \_\_\_\_\_ (Zip Code) \_\_\_\_\_  
(Occupation) \_\_\_\_\_ (Phone) (\_\_\_\_) \_\_\_\_\_  
(Relationship) \_\_\_\_\_

**Driving Information (for positions requiring driving other than truck drivers)**

Do you have a valid Driver's License? (Please circle one) **Yes or No**

List your Driver's License information:

(License #) \_\_\_\_\_ (State Registered) \_\_\_\_\_ (Exp. Date) \_\_\_\_\_

Please list and explain any traffic points or convictions in the last five (5) years, if any, other than parking violations: \_\_\_\_\_

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Do you have a vehicle available for your use if needed for the position? (Please circle one) **Yes or No**

**THIS APPLICATION IS NOT COMPLETE UNTIL SIGNED AND ALL STATEMENTS BELOW  
HAVE BEEN READ AND INITIALED**

\_\_\_\_\_ I understand that this application is not intended to create, nor should it be construed to create, an express or implied contract of employment. It does not create contractual obligations of any kind. If hired, I will be employed at will. I understand that this means that either I am or the employer is free to terminate the employment relationship at any time with or without cause or prior notice. I understand that no representative of the Company, other than the President, Treasurer or Executive Vice President has any authority to enter into an agreement for employment for any specified period of time or, in any way, to modify the at-will nature of the employment relationship.

\_\_\_\_\_ I authorize the investigation into my background in compliance with the Fair Credit Reporting Act, including obtaining a criminal history report at any time prior to and if employed during, the course of my employment. I hereby give the Company permission to directly or through a third party contact schools, previous employers, references and other. I hereby release the Company and those it contacts from any liability whatsoever as a result of such contact and the information provided and received as a result of such contact.

\_\_\_\_\_ I hereby agree that if I am offered employment, I will submit to a required drug test at the expense of the Company, and that a negative result is a condition of employment. I hereby authorize the release of the laboratory tests to which I have consented, for the purpose of determining the presence of drugs or their metabolites in my body to the Company, to the examining physician, medical review officer, substance abuse professionals, and/or other agents of the Company, with the understanding that the Company will review the results of these tests in connection with making a decision concerning my application for employment. Other than for the purpose of making a determination concerning my application for employment, I understand that the examining physician, medical review officer, substance abuse professionals, and/or other agents of the Company will not use or further disclose the information released pursuant to this authorization unless further expressly authorized by me or unless disclosure is required by law.

\_\_\_\_\_ I understand that if I am offered and accept employment with the Company, I am prohibited from using or disclosing confidential and proprietary information that I have acquired during my employment for use other than for the benefit of the Company. I also understand that I may be required to sign a confidentiality agreement and/or non-solicitation/non-disclosure agreement as a condition of the employment.

\_\_\_\_\_ I understand that if I am considered for a driving position, I am subject to all DOT regulations as they apply to the position, including those regulations regarding physical examinations, as well as drug and alcohol testing procedures.

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in the refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.

**Applicants Signature** \_\_\_\_\_

**Date** \_\_\_\_\_