



# Employment Application

Instructions: We appreciate your interest in our organization. We consider applicants for all positions without regard to race, color, creed, age, religion, sex, disability or handicap, marital status, national origin, veteran status or arrest/conviction record.

## Application must have ALL information completed to be considered.

Notes: Applicants hired by American Food & Vending are required to work at other AF&V locations within reasonable distance if needed. Also, employees may not work for competitors unless approved by Human Resources.

Position(s) applied for: \_\_\_\_\_ Date of application: \_\_\_\_\_

How did you learn about us?  Newspaper Ad  Internet Ad  Walk-in  Friend/Relative  Other \_\_\_\_\_

Complete Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Home Phone No. (\_\_\_\_\_) \_\_\_\_\_

Current Address: \_\_\_\_\_  
(street address) (city) (state) (zip code)  
From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_

Last Address: \_\_\_\_\_  
(street address) (city) (state) (zip code)  
From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_

Next to Last Address: \_\_\_\_\_  
(street address) (city) (state) (zip code)  
From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_

And Before That Address: \_\_\_\_\_  
(street address) (city) (state) (zip code)  
From Month/Year \_\_\_\_\_ To Month/Year \_\_\_\_\_

**LIST ALL LAST NAMES .....ever used in the past including maiden, married or other names under which work, school or other records would be located:**

Names of friends or relatives presently or previously employed by American Food & Vending: \_\_\_\_\_

If you are under 18 years of age, can you furnish a work permit? Yes  No  N/A

Have you ever filed an application with us before? If yes, give date: \_\_\_\_\_ Yes  No

Have you ever been employed with us before? If yes, give dates: \_\_\_\_\_ Yes  No

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes  No

Do you have any restrictions or obligations that would prevent you from working overtime? Yes  No   
What restrictions? \_\_\_\_\_

Do you have any restrictions or obligations that would prevent you from working consistently or arriving at work on time? Yes  No

On what date would you be available to work? \_\_\_\_\_

Are you available to work: (Check All That Apply)  
 Full Time  Part Time  Shift Work  Weekends  1st Shift  2nd Shift  3rd Shift

Can you travel if the job requires it? Yes  No   
If yes, are there limitations? Explain. \_\_\_\_\_

Have you ever been convicted of a crime (felony and misdemeanor) including DWI/DUI or had your driver's license suspended? (Conviction will not necessarily disqualify an applicant from employment.) If Yes, please list all dates of offenses and dispositions. Yes  No





**I HEREBY GIVE MY CONSENT AND PERMISSION FOR**

\_\_\_\_\_  
(List Current/Former Company - Employer #1 Name)

\_\_\_\_\_  
(List Former Company - Employer #5 Name)

\_\_\_\_\_  
(List Former Company - Employer #2 Name)

\_\_\_\_\_  
(List Former Company - Employer #6 Name)

\_\_\_\_\_  
(List Former Company - Employer #3 Name)

\_\_\_\_\_  
(List Former Company - Employer #7 Name)

\_\_\_\_\_  
(List Former Company - Employer #4 Name)

**If you do not want us to contact your current employer, check this box and do not complete Employer #1. All other employer names must be completed.**

**BY SIGNATURE BELOW, I HEREBY GIVE PERMISSION TO THE ABOVE NAMED EMPLOYER(S) TO RELEASE FULL DETAILS OF MY EMPLOYMENT INCLUDING DESCRIPTION AND EVALUATION OF WORK PERFORMED, WORK HABITS, QUALIFICATIONS, AND ANY OTHER PERTINENT INFORMATION REGARDING MY CURRENT AND/OR PAST EMPLOYMENT TO:**

HUMAN RESOURCES  
AMERICAN FOOD & VENDING  
124 METROPOLITAN PARK DRIVE  
SYRACUSE, NY 13088

PHONE: 315-457-9950  
FAX: 315-457-9103  
EMAIL: [humanresources@afvusa.com](mailto:humanresources@afvusa.com)

**ALL APPLICANTS MUST READ & SIGN THE FOLLOWING STATEMENT**

The information I have provided in this application is accurate, complete, and true to the best of my knowledge. I understand that any misrepresentation or omission of facts in my application or during the interview process may result in the refusal of employment or, if discovered after I am employed, my immediate termination of employment.

In making this application for employment, I understand that American Food & Vending Corp. or any of its agents acting on its behalf, may request an investigative consumer report. This report may contain information obtained through personal interviews with third parties such as neighbors, friends, business associates, financial sources and acquaintances. This inquiry includes information as to character, general reputation and personal characteristics.

I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature or scope of the investigation.

I hereby give American Food and Vending Corp. the permission to contact schools, previous employers, references, and others, and hereby release American Food and Vending Corp. from any claims or liability as a result of such contact.

I understand that the Employee Handbook and the Policies and Procedures of American Food & Vending Corp. do not constitute the terms of an employment contract between American Food & Vending Corp. and me, and that employment, if offered, is for no fixed duration. Either the company or I can terminate my employment at any time with or without notice or cause for any reason not otherwise prohibited by law. This can be changed only by written agreement by an officer of the corporation.

I understand that American Food and Vending Corp. has a drug and alcohol policy that (1) requires pre-employment testing and I hereby consent to such testing in connection with this application; (2) if hired, my consent to, compliance with, and successful passing of tests under this policy will be conditions of my continued employment. I hereby release American Food and Vending Corp. from any claims or liability as a result of such testing. I understand that I will be subject to immediate termination for failing to submit to an examination or testing or, testing positive for illegal drugs, drug misuse or alcohol misuse anytime during my employment.

**I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT IN ITS ENTIRETY AND HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS REGARDING ANY ASPECT OF THIS APPLICATION.**

**I ALSO ACKNOWLEDGE THAT I HAVE BEEN GIVEN A COPY OF MY RIGHTS UNDER THE FAIR CREDIT REPORTING ACT.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name (Please Print)

\_\_\_\_\_  
Social Security Number

**Thank you for taking the time and having the interest to complete our employment application.**

## American Food and Vending

### DISCLOSURE TO EMPLOYMENT APPLICANT REGARDING PROCUREMENT OF CONSUMER REPORTS

In connection with and to better evaluate your application for employment, we may procure a Background Investigative Report and/or Consumer Report on you as part of the application process. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, we will provide you with a copy of the consumer report and a description in writing of your rights under the federal Fair Credit Reporting Act before making the adverse decision.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. By signing this document, you acknowledge that you have been given a summary of these rights along with this document.

I, \_\_\_\_\_, pursuant to the Fair Credit Reporting Act, 15 U.S.C.A. §§ 1681(b)(2)(A), hereby authorize American Food and Vending and/or its representatives, to obtain written consumer or investigative reports bearing on my credit standing or capacity, general reputation, personal characteristics, or mode of living in order to evaluate my opportunities for prospective employment

Applicant's Name: \_\_\_\_\_  
(PLEASE PRINT)

Applicant's Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To All Applicants:

The information requested above is used to assist in the completion of a background investigation. The information will be maintained in a limited access file, detached from your application. The information will be used for the sole purpose of identification when conducting a background investigation.

**American Food & Vending - Applicant Questionnaire**

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

**Name:** \_\_\_\_\_ **Position Applied For:** \_\_\_\_\_

1. Tell me if your current operation runs well. What changes are needed?  
\_\_\_\_\_  
\_\_\_\_\_
2. How would you rate your current manager/supervisor on a scale of 1-10? \_\_\_\_\_ (10= Highest) Why?  
\_\_\_\_\_  
\_\_\_\_\_
3. Have you ever taken action to improve your job? Give specific examples.  
\_\_\_\_\_  
\_\_\_\_\_
4. Tell us about a specific incident involving a difficult customer and how you handled it.  
\_\_\_\_\_  
\_\_\_\_\_
5. Have you ever witnessed poor service by a coworker \_\_\_\_\_? If yes, how did you handle it?  
\_\_\_\_\_  
\_\_\_\_\_
6. Have you ever had to be reprimanded/disciplined or counseled by your supervisor? \_\_\_\_\_  
A. What were the issues? \_\_\_\_\_  
B. Was it justified? \_\_\_\_\_ What would you do differently??  
\_\_\_\_\_
7. Have you ever been in a situation where you did not agree with a company policy or you felt the policy was hampering your job or customer service? \_\_\_\_\_ How did you handle it?  
\_\_\_\_\_  
\_\_\_\_\_
8. Have you ever witnessed a coworker breaking company rules? How? What did you do?  
\_\_\_\_\_  
\_\_\_\_\_
9. What can you offer an employer that would separate you from other candidates?  
\_\_\_\_\_  
\_\_\_\_\_
10. Have you ever had a formal performance review? \_\_\_\_\_ Was it fair? \_\_\_\_\_  
\_\_\_\_\_
11. How many days were you absent during your last job? \_\_\_\_\_ Days
12. Did you have any problems in your last job? \_\_\_\_\_  
\_\_\_\_\_
13. If you witnessed, or believed you saw someone stealing (money, food, office supplies, etc.), would you report it? \_\_\_\_\_  
Why? Why not? \_\_\_\_\_  
\_\_\_\_\_
14. When I contact your last two supervisors, what will he/she tell me about you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Thank you.**

## APPLICANT – REMOVE THIS DOCUMENT FROM APPLICATION AND RETAIN FOR YOUR RECORDS.

Para informacion en espanol, visite [www.ftc.gov/credit](http://www.ftc.gov/credit) o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.
- **Consum-er reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation , Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051