



QUINN'S MARKET

APPLICATION FOR EMPLOYMENT

Please indicate which location you are applying for:

Archbald

10 Kennedy Drive
Archbald, PA 18403
(570) 876-2520

Peckville

1427 Main Street
Peckville, PA 18452
(570) 487-2887

Pittston

401 Kennedy Blvd.
Pittston, PA 18640
(570) 655-8000

Quinn's Cafe

224 N. Main Street
Archbald, PA 18403
(570) 876-3340

Quinn's Market is an Equal Opportunity Employer			Today's Date		Social Security Number	
Name (Last)		(First)		(Middle)		Have you ever worked or attended school under another name that we need to know to verify your records? Y <input type="checkbox"/> N <input type="checkbox"/> (Check One) - If yes, Name: _____
Permanent Address			City		State	Zip Code
Hobbies or Interests of Special Skills			Home Phone Number		Alternate Phone Number	
Position / Department Desired		Schedule Preference <input type="checkbox"/> Full-Time 35+ hrs. & (5-6 days) <input type="checkbox"/> Part-Time Days / Evenings /Weekends		What days or times are you NOT available for work?		
List names of friends & relatives currently employed by Quinn's Market:		Are you 18 years of age? or over? Y <input type="checkbox"/> N <input type="checkbox"/>		Are you currently employed? Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Not Employed <input type="checkbox"/>		
List availability to work: Please fill in hours for each day. Sun. _____ Mon. _____ Tues. _____ Wed. _____ Thurs. _____ Fri. _____ Sat. _____						
List any organizations of which you are a member; <i>(Exclude any organization which would indicate race, color, creed, ancestry, national origin, religion, sex, or marital status)</i>						
Have you ever been employed by Quinn's Market? Y <input type="checkbox"/> N <input type="checkbox"/>			If Yes, under what name were you employed? _____ What store location did you work in? _____ Dates employed? (MM/YY) From: _____ To: _____			
Previous Employment - List in order of employment starting with your present employment: Please account for all times including current employment, military service, part-time jobs and periods of unemployment.						
Name of Business	Address of Business City and State	Rate / Salary	Supervisor's Name	Job Title	Reason for leaving	From (MM/YY) To (MM/YY)

Education:						
School	Name of school & address	Course of study	Date from (MM/YY)	Date to (MM/YY)	Circle last yr. completed	List Diploma or Degree
High school:					1 2 3 4	
College:					1 2 3 4	
Trade school:					1 2 3 4	
Other - (specify):						

Additional History Inquires:

Have you ever been dismissed or forced to resign from any employment?
 Y N If Yes, explain here: _____

Have you ever been convicted of a felony crime or theft-related misdemeanor within the last 5 years?
 Y N If Yes, explain here: _____

Permission to work:

If employment is offered, can you submit verification of your legal right to work in the U.S.?
 Y N

Referral source:

Walk-In Applicant _____ Newspaper ad _____ Employee referral (Name) _____ School/college (Name) _____
 Internet _____ E-mail _____ Other, list _____ Community Organization _____

References, (Can Not Be Related To You):

Reference Name	Reference Name	Reference Name
Street Address	Street Address	Street Address
City, St. & Zip	City, St. & Zip	City, St. & Zip
Phone	Phone	Phone
Job Title	Job Title	Job Title
Years acquainted	Years acquainted	Years acquainted

A good attendance record is an important part of every associate's overall performance. Do you know of any reason you may not be able to comply with Quinn's attendance policy? If so, please explain:

IMPORTANT PLEASE READ CAREFULLY BEFORE SIGNING!

I certify that the answers I have given in this application are true and accurate to the best of my knowledge and I understand that any false or misleading answers or any omission or concealment of facts will disqualify me from consideration for employment or will be grounds for my immediate discharge.

I agree to conform to the rules and regulations of the Company and if employed, I understand and agree that my employment is at-will and no employment contract rights have been created. I also understand and agree that my employment may be terminated at any time with or without cause, and without advance notice at the option of either the Company or myself. I also understand that any offer or employment is conditional upon the satisfactory completion of the verification process as required by the Immigration Reform and Control Act of 1986 and that the Company will hire only those who are legally authorized to work in the United States and who present acceptable proof of their lawful employment status and identity. By placing my signature below, I certify and acknowledge that I have read the above and understand it.

I CERTIFY THAT I HAVE READ THE ABOVE, UNDERSTAND IT AND AGREE TO IT.

Signature of applicant (do not print)

Date