



APPLICATION FOR EMPLOYMENT

*This application for employment is good for 30 days only.
Consideration for employment after 30 days requires a new application.*

PERSONAL

Name _____ Date ____ / ____ / ____ Phone Number (____) _____
Last First Middle

Address _____
Number & Street Address City State Zip Code

Position Sought _____ Full Time Part Time Date Available ____ / ____ / ____ Salary Desired \$ _____

Are you over 18 years old? Yes No

Are you legally eligible for employment in the United States?(If offered employment, you will be required to provide documentation to verify eligibility.)
 Yes No

A criminal Background check may be required of any applicant who is selected for an interview or to whom a conditional offer of employment is made.

EDUCATION

Please indicate education or training which you believe qualifies you for the position you are seeking.

High School:

No. of Yrs. Completed (circle one) 1 2 3 4

Diploma: Yes No G.E.D.: Yes No

School(s) _____

City/State _____

College and/or Vocational School:

No. of Yrs. Completed (circle one) 1 2 3 4

School(s) _____

City/State _____

Major _____

Degrees Earned _____

Other:

School(s) _____

City/State _____

Course _____

Degree or Certificate Earned _____

Training or Certificates:

School(s) _____

City/State _____

Course _____

Certificate Earned _____

PROFESSIONAL LICENSE OR MEMBERSHIP

Type of License(s) Held _____

License Number _____

License Expiration Date _____

Other Professional Memberships _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

SKILLS

Data Entry (choose all that are applicable)

Excel Typing (WPM:____) Lotus 1-2-3 CRT

Other _____

Word Processing (choose all that are applicable)

Word Perfect Microsoft Word

Other _____

Other Software Skills _____

Other Office Skills _____

Have you ever been employed in any facility of Bell Flavors & Fragrances, Inc.? Yes No

If so, please state facility name and location and dates of employment _____

EMPLOYMENT

List last employer first, including U.S. Military Service.

May we contact your present employer? Yes No

If you were employed under a different name, please indicate your full name at the time: _____

1. Employer _____

Address _____ Phone _____

Position _____

Length of Employment (Mo./Yr.) From ____ / ____ To ____ / ____

Department _____ Supervisor _____

Duties _____

FT PT No. of Hrs. _____ Salary \$ _____

Reason for Leaving _____

2. Employer _____

Address _____ Phone _____

Position _____

Length of Employment (Mo./Yr.) From ____ / ____ To ____ / ____

Department _____ Supervisor _____

Duties _____

FT PT No. of Hrs. _____ Salary \$ _____

Reason for Leaving _____

3. Employer _____

Address _____ Phone _____

Position _____

Length of Employment (Mo./Yr.) From ____ / ____ To ____ / ____

Department _____ Supervisor _____

Duties _____

FT PT No. of Hrs. _____ Salary \$ _____

Reason for Leaving _____

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Explain any gaps in work history: _____

Have you ever been discharged or asked to resign from a job?

Yes No If Yes, please explain: _____

REFERENCES

Professional

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

Personal

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

Name _____

Address _____

Phone () _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Bell Flavors & Fragrances, Inc. to verify their accuracy and to obtain reference information on my work performance. I hereby release Bell Flavors & Fragrances, Inc. from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal. I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or Bell Flavors & Fragrances, Inc. may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date ____ / ____ / ____