



## EMPLOYMENT APPLICATION

### How Did You Hear About Our Company?

- ☐ Walk-In Applicant
- ☐ TFP Nutrition Website
- ☐ Radio Station
- ☐ Employee Referral: \_\_\_\_\_  
*Employee's Name*
- ☐ Other: \_\_\_\_\_

<b>APPLICANT INFORMATION</b>													
Last Name					First				M.I.		Date		
Address													
City						State				Zip Code			
Phone						Date of Birth							
Date Available to Start					Desired Salary								
Position Applied For													
Are you a citizen of the United States?	YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>			
Are you of age 18 yrs or older?	YES <input type="checkbox"/>		NO <input type="checkbox"/>										
What times are you willing to work?	Day <input type="checkbox"/>		Afternoon <input type="checkbox"/>		Night <input type="checkbox"/>								
What employment status are you seeking?	Full Time <input type="checkbox"/>			Part Time <input type="checkbox"/>									
Have you ever worked for this company?	YES <input type="checkbox"/>		FROM _____ TO _____			NO <input type="checkbox"/>							
Have you ever been convicted of a felony?	YES <input type="checkbox"/>		YEAR _____		NO <input type="checkbox"/>		If yes, please give detailed explanation:						
<b>EDUCATION</b>													
High School							City/State						
Did you graduate?	YES <input type="checkbox"/>		NO <input type="checkbox"/>										
College													
Did you graduate?	YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree								
Other													
Did you graduate?	YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree								
<b>REFERENCES</b>													
<i>Please list three professional references</i>													
Full Name				Relationship				Phone					
Full Name				Relationship				Phone					
Full Name				Relationship				Phone					
<b>PREVIOUS EMPLOYMENT</b>													
Company						Phone							
City/State						Supervisor							
Job Title				Starting Salary \$	Ending Salary \$		Start Date			End Date			
Duties Performed													

**PREVIOUS EMPLOYMENT CONTINUED**

Company		Phone	
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City/State		Supervisor	
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Job Title		Starting Salary \$	Ending Salary \$	Start Date	End Date
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Duties Performed	
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Company		Phone	
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City/State		Supervisor	
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Job Title		Starting Salary \$	Ending Salary \$	Start Date	End Date
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Duties Performed	
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Company		Phone	
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City/State		Supervisor	
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Job Title		Starting Salary \$	Ending Salary \$	Start Date	End Date
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Duties Performed	
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Company		Phone	
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City/State		Supervisor	
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Job Title		Starting Salary \$	Ending Salary \$	Start Date	End Date
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Duties Performed	
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Branch		From		To	
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Rank at Discharge		Type of Discharge	
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If other than honorable, explain	
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## DISCLAIMER AND SIGNATURE

### Applicant Statement

I certify that this application was completed by me, and that all entries on it and information in it provided by me are true and complete, to the best of my knowledge. I acknowledge and agree that any misstatement, omission, falsification, or misrepresentation of fact in this application may disqualify me from further consideration for employment or, if not discovered until after I am hired, may result in disciplinary action up to and including termination of employment.

To evaluate me for employment, I authorize TFP Nutrition to contact any or all of my previous employers, references, and educational institutions, and otherwise to fully investigate my suitability for employment, character, general reputation, personal characteristics, mode of living, work habits, skills, and/or abilities, including contacting a credit bureau, credit agency, or other consumer reporting agency of its choice. I acknowledge that certain reports that the Company receives as a result of its investigation may be "consumer reports" or "investigative consumer reports" and that I may be entitled under federal law to make a written request to receive disclosure of the nature and scope of certain aspects of the Company's investigation. I acknowledge that the results of any such investigation may be disclosed to the Company's employees or agents involved in the employment decision, and I consent to such disclosure. In connection with and in consideration of the Company's consideration of my application for employment, I hereby release and acquit the Company and its employees and agents from any liability whatsoever, including for their own negligence, for any damage that I may suffer or sustain by reason of its use of any such report or information.

I acknowledge and agree that this employment application is not a contract or a promise of employment for any period. If hired by the Company, my employment will not be for any specific term and may be terminated, either by me or by the Company, at any time, for any reason, and without advance notice. No employee of the Company, other than the CEO of the Company, has the authority to enter into any agreement for employment for a specified period of time, or to make any statement contrary to the provisions outlined above.

I acknowledge and agree that any offer of employment will be conditioned on my satisfactory completion of a medical examination and substance abuse test. If employed, I agree to comply with all the rules, policies, and operating procedures that may be in effect at the time I am hired or may thereafter be adopted by the Company.

I acknowledge receipt of my personal copy of the Application Statement and the Information to Applicants section.

I acknowledge and agree that I have read this Applicant Statement and Information to Applicants section.

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

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### Information to Applicants

TFP Nutrition is an equal opportunity employer. Title VII of the Civil Rights Act of 1964 prohibits discrimination by employers against job applicants or employees because of their race, color, religion, sex, or national origin. The Age Discrimination in Employment Act of 1967 prohibits employment discrimination by employers against those applicants and employees who are at least 40 years of age. The Americans with Disability Act of 1990 prohibits employment discrimination by employers against applicants or employees with disabilities because of disability. The Texas Commission on Human Rights Act prohibits discrimination by employers against job applicants or employees because of race, color, religion, sex, or national origin, age, or disability.

This application contains an authorization for the Company to fully investigate your suitability for employment and personal history by obtaining information from your previous employers and/or other knowledgeable persons as to their firsthand experiences with you, and also, when deemed necessary, by obtaining reports from credit bureaus, credit agencies, or other consumer reporting agencies. Under some circumstances, certain of such reports may be "consumer reports" or "investigative consumer reports" as to which, under the Fair Credit Reporting Act, you are entitled, upon your request in writing, to receive a complete and accurate disclosure of the nature and scope of the investigation requested by the Company