



EMPLOYMENT APPLICATION

970 Woodland St.
Nashville, TN 37206
Phone (615) 650-3600
Fax (615) 650-3613
Online www.TheTurnipTruck.com

The Turnip Truck Natural Market is proud to be an equal opportunity and affirmative action employer. All qualified applicants are considered without any regard whatsoever to age, race, gender, color, sex, religion, sexual orientation, nation origin, marital status, ancestry, citizenship, veteran status, or physical or mental disability.

IMPORTANT: Please complete all information on this application to the best of your ability. Incomplete, unclear or illegible information may result in automatic rejection of your application. Feel free to attach a resume or use a separate sheet of paper for any additional information you'd like to include with your application.

PERSONAL			
Last Name	First Name	Initial	Social Security Number
Nicknames or Other Name(s) Used			Home Telephone ()
Address			Other Telephone ()
Position Applying For		Salary Desired	Email Address
Have you ever interviewed with The Turnip Truck before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when?	
Have you ever been employed by The Turnip Truck before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when?	
Do you have any relatives employed by The Turnip Truck? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, who?	
Are you 18 years of age or older? <input type="checkbox"/> Yes <input type="checkbox"/> No			

EDUCATION / SKILLS			
School Name	City/State	Major Studies	Degree or Diploma
High School			
College/University			
Vocational, Business, Other			
Please list any professional designations/certifications outside of the education listed above			
Any other special knowledge, skills or qualifications you think would work well with your employment?			
How well do you type? <input type="checkbox"/> Not at all <input type="checkbox"/> Somewhat well <input type="checkbox"/> Very well		How would you rate your computer skill level for basic computing tasks (word processing, typing, etc)? <input type="checkbox"/> Beginner <input type="checkbox"/> Intermediate <input type="checkbox"/> Advanced	
Do you have any additional computer skills you'd like to tell us about? May include any software or hardware skills.			

EMPLOYMENT HISTORY

Please list all employments for the past 10 years, starting with the most recent position. Feel free to attach a resume, but not in place of completing this page. Attach additional page(s) if necessary.

MOST RECENT EMPLOYMENT

Employed From	Employed Until	Supervisor Name	Starting Salary
Employer Name	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

NEXT RECENT EMPLOYMENT

Employed From	Employed Until	Supervisor Name	Starting Salary
Employer Name	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

NEXT RECENT EMPLOYMENT

Employed From	Employed Until	Supervisor Name	Starting Salary
Employer Name	Employer Address	Supervisor Phone #	Ending Salary
Job Title		Reason for Leaving	
Duties & Responsibilities			

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Job Title		Reason for Leaving	
Duties & Responsibilities			

GENERAL

The Turnip Truck is as unique as the Natural Foods industry itself. Each member of our diverse team has been drawn to our business for many and varied reasons. Please tell us what interests you about our business and why you think you'd be a good addition to our team.

Our store hours are Monday – Saturday, 8:00 am – 8:00 pm and Sunday, 10:00 am – 7:00 pm. However, opening shifts require arrival well before the store's opening. Closing shifts include duties past closing time. We are open seven days a week, excluding select holidays, which you will be informed of in advance. Scheduling requires constant communication between each staff member and the scheduling manager(s). So that we will know where you may best fit, please list any days and hours are you NOT available to work. Also include all days and/or hours you *think* could possibly be a scheduling conflict.

I will not be able to work these days:

I will not be able to work these hours:

These days/hours are possible scheduling conflicts and we will need to discuss:

Comments:

AUTHORIZATION & CERTIFICATION

Do we have your permission to contact current and/or past employers for references?

Yes No

If hired, will you be able to work overtime if needed?

Yes No

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or seals by court? (A "yes" response does not automatically disqualify your application.)

Yes No

Comments:

All information I have supplied on this application is true and correct. I understand that, in the event of my employment by The Turnip Truck, I shall be subject to dismissal if any information that I have given in this application is found to be false or misleading, or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize The Turnip Truck to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to The Turnip Truck and will hold The Turnip Truck and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with The Turnip Truck is intended to create an employment contract between myself The Turnip Truck. On the contrary, I understand and agree that if hired, my employment may be terminable at will and may be terminated by The Turnip Truck at any time and for any reason whatsoever.

If employed, I will be required to provide original government-issued documents that verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

Printed Name

Signature

Date