



APPLICATION FOR EMPLOYMENT

MARS SUPER MARKETS, INC.
IS AN EQUAL OPPORTUNITY EMPLOYER

LOCATION

TODAY'S DATE:

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, OR DISABILITY TO THE EXTENT REQUIRED BY LAW.

ALL EMPLOYMENT APPLICATIONS VALID FOR THIRTY DAYS ONLY

POSITION APPLYING FOR: (REQUIRED FOR CONSIDERATION) _____

TYPE OF EMPLOYMENT APPLYING FOR: _____ FULL TIME _____ *PART TIME _____ *LIMITED SCHEDULE

*PART TIME & LIMITED SCHEDULE EMPLOYMENT ONLY.

PLEASE SPECIFY THE DAYS & HOURS THAT YOU ARE AVAILABLE ON PAGE 3 OF THIS APPLICATION

PLEASE PRINT

NAME: _____
LAST FIRST MIDDLE

ADDRESS: _____
STREET CITY STATE ZIP CODE

TELEPHONE: () _____ SOCIAL SECURITY NUMBER: _____
AREA CODE

ALTERNATE TELEPHONE: () _____ E-MAIL ADDRESS: _____
AREA CODE

HAVE YOU EVER FILED IN APPLICATION WITH MARS? _____ YES _____ NO If yes... WHEN? _____ WHERE? _____

HAVE YOU EVER BEEN EMPLOYED BY MARS SUPER MARKETS? _____ YES _____ NO

If yes... WHEN? _____ DID YOU USE A DIFFERENT NAME AT THAT TIME? If yes... _____

WILL YOU TRAVEL TO DIFFERENT STORES, IF REQUIRED? _____ YES _____ NO

WILL YOU WORK OVERTIME, IF ASKED? _____ YES _____ NO

ARE YOU ON LAY-OFF OR SUBJECT TO RECALL FOR ANY JOB? _____ YES _____ NO

HAVE YOU EVER BEEN DISCHARGED FROM ANY JOB? _____ YES _____ NO

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? _____ YES _____ NO

(PROOF OF IDENTITY AND AUTHORIZATION TO WORK WILL BE REQUIRED, IF HIRED)

**HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR? _____ YES _____ NO

**HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____ YES _____ NO

**IF YES, BRIEFLY DESCRIBE THE CIRCUMSTANCES OF YOUR CONVICTION, PLACE OF THE OFFENSE AND DISPOSITION OF THE CASE. A CONVICTION WILL NOT NECESSARILY BAR YOU FROM EMPLOYMENT. YOU MAY OMIT INFORMATION REGARDING CONVICTIONS WHICH HAVE BEEN EXPUNGED: _____

LIST ANY EXPERIENCE, SKILLS OR QUALIFICATIONS YOU FEEL WOULD ESPECIALLY QUALIFY YOU FOR WORK WITH MARS SUPER MARKETS: _____

EDUCATIONAL BACKGROUND:

TYPE OF SCHOOL	NAME AND ADDRESS	NUMBER YEARS COMPLETED	GRADUATED	MAJOR
HIGH SCHOOL			YES NO	
COLLEGE			YES NO	
POST GRADUATE			YES NO	
OTHER			YES NO	

ARE YOU ENROLLED IN ANY COURSES NOW? YES NO IF YES, WHAT COURSES? _____
 HOW MANY DAYS/NIGHTS PER WEEK? _____ DATE YOU WILL FINISH? _____

Note any skills which would be helpful in considering you for any available position:

DO YOU TYPE? YES NO WPM _____ DATA ENTRY YES NO SPH _____
 WORD PROCESSOR _____ 10 KEY ADDER _____ PC APPLICATIONS _____ CASH REGISTER _____ OTHER _____

EMPLOYMENT HISTORY: LIST LAST EMPLOYER FIRST AND INCLUDE MILITARY SERVICE, IF APPLICABLE.

EMPLOYER: (INCLUDE CITY, STATE & ZIP)	PHONE:	DATES EMPLOYED		Work Performed
		FROM	To	
ADDRESS:				
JOB TITLE:				
		RATES / SALARY		
SUPERVISOR:		START	FINAL	
REASON FOR LEAVING:	MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			

EMPLOYER: (INCLUDE CITY, STATE & ZIP)	PHONE:	DATES EMPLOYED		Work Performed
		FROM	To	
ADDRESS:				
JOB TITLE:				
		RATES / SALARY		
SUPERVISOR:		START	FINAL	
REASON FOR LEAVING:	MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			

EMPLOYER: (INCLUDE CITY, STATE & ZIP)	PHONE:	DATES EMPLOYED		Work Performed
		FROM	To	
ADDRESS:				
JOB TITLE:				
		RATES / SALARY		
SUPERVISOR:		START	FINAL	
REASON FOR LEAVING:	MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO			

POSITION QUALIFICATIONS:

POSITION APPLYING FOR _____ DESIRED SALARY _____

HOW FAR DO YOU LIVE FROM THIS LOCATION? _____

DO YOU HAVE RELIABLE TRANSPORTATION TO AND FROM THIS LOCATION? _____ YES _____ NO

CHECK THOSE AREAS WHERE YOU HAVE EXPERIENCE

_____ FOOD SERVICE _____ CUSTOMER SERVICE _____ MANAGEMENT _____ QUALITY CONTROL _____ SAFETY

HOW DID YOU FIRST HEAR ABOUT JOB OPPORTUNITIES AT MARS SUPER MARKETS, INC.?

_____ IN-STORE SIGN _____ OUTSIDE BUILDING SIGN _____ TELEVISION _____ NEWSPAPER AD

_____ RADIO _____ CAREER WEB SITE _____ OTHER INTERNET SITE

_____ EMPLOYEE REFERRAL (Name) _____ OTHER (Specify) _____

ARE YOU ABLE TO PERFORM THE JOB-RELATED FUNCTIONS OF THE POSITION FOR WHICH YOU ARE APPLYING, WITH OR WITHOUT REASONABLE ACCOMMODATIONS? _____ YES _____ NO

WHAT IS THE BEST TIME TO CALL TO SCHEDULE AN INTERVIEW? (CHECK ALL THAT APPLY)

_____ MORNING _____ AFTERNOON _____ EVENING

***TELL US ABOUT YOUR AVAILABILITY:**

DATE AVAILABLE TO BEGIN WORK _____ / _____ / _____

WHAT TIMES ARE YOU AVAILABLE TO WORK?		
DAY	FROM	TO
SUNDAY	AM	AM
	PM	PM
MONDAY	AM	AM
	PM	PM
TUESDAY	AM	AM
	PM	PM
WEDNESDAY	AM	AM
	PM	PM
THURSDAY	AM	AM
	PM	PM
FRIDAY	AM	AM
	PM	PM
SATURDAY	AM	AM
	PM	PM

TOTAL WEEKLY HOURS AVAILABLE _____

MINORS - THIS SECTION TO BE COMPLETED ONLY IF YOUR ARE UNDER AGE 18:

DATE OF BIRTH if under 18: (MM/DD/YY) _____ / _____ / _____ TIME DISMISSED FROM SCHOOL _____

DO YOU HAVE A WORK PERMIT FROM YOUR SCHOOL DISTRICT (16 & 17 year olds only) _____ YES _____ NO

CAN YOU WORK: SCHOOL NIGHTS? _____ YES _____ NO WEEKENDS? _____ YES _____ NO

SCHOOL ACTIVITIES THAT WOULD REQUIRE SCHEDULE ADJUSTMENTS _____

QUESTIONS:

- 1. WHAT DID YOU LIKE ABOUT YOUR LAST JOB? _____

- 2. WHAT DID YOU DISLIKE ABOUT YOUR LAST JOB? _____

- 3. WHAT KINDS OF DECISIONS DID YOU MAKE AT YOUR LAST JOB? _____

- 4. HOW WOULD YOU RATE YOUR JOB PERFORMANCE? IN OTHER WORDS, WHAT ARE YOUR GOOD AND BAD POINTS?

REFERENCES: GIVE THREE REFERENCES THAT ARE NOT RELATED AND NOT PREVIOUS EMPLOYERS.

- NAME _____ ADDRESS _____ PHONE _____
- NAME _____ ADDRESS _____ PHONE _____
- NAME _____ ADDRESS _____ PHONE _____

REFERENCES: PLEASE IDENTIFY ANY RELATIVES THAT ARE PRESENTLY WORKING FOR MARS SUPER MARKETS, INC.

- NAME _____ STORE _____ RELATIONSHIP _____
 - NAME _____ STORE _____ RELATIONSHIP _____
 - NAME _____ STORE _____ RELATIONSHIP _____
- APPROVAL: _____ DATE: _____

READ CAREFULLY BEFORE SIGNING

AUTHORIZATION

I certify that all questions in this application are fully and correctly answered. I understand that the misrepresentation or omission of facts called for in this application is cause for immediate dismissal or rejection. I authorize Mars Super Markets, Inc. to investigate all statements contained in this application and to obtain information from my previous employers or other sources concerning my character, employment history, work history, credit history and any other information relative to my suitability for employment by Mars Super Markets, Inc. which it may, in its sole discretion, deem relevant and necessary and release from any and all liability or responsibility any person or organization supplying such information to Mars Super Markets, Inc. I agree that a photo copy of this authorization may be accepted with the same authority as the original. Further, I understand and agree that my employment will be on an "at will" basis and for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated at any time with or without notice at the option of either Mars Super Markets, Inc. or myself. Further, I understand that no officer, agent, representative or employee of Mars Super Markets, Inc. has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to that contained in the previous sentence. I also authorize Mars Super Markets, Inc. to deduct from my wages any amounts which may be due it as a result of overpayment of wages, loss or destruction of its property or any other amounts which I may lawfully owe Mars Super Markets, Inc. or for which I have received full consideration. I further understand that if I become employed by Mars Super Markets, Inc., that Mars Super Markets, Inc. retains the right to hire, transfer, terminate or otherwise staff at its own discretion as it deems appropriate and in the best interest of the Company. In the event I become an employee of Mars Super Markets, Inc. I agree to comply with all rules and regulations and understand I may be terminated or disciplined for any violations. I consent to take any physical examination permitted by the Americans with Disabilities Act under Maryland Law including but not limited to urine, breath, blood or other examination or tests for alcohol, drugs or illegal substances that may be requested by Mars Super Markets, Inc. should I be offered and accept employment with Mars Super Markets, Inc. I understand that any such test or examinations will be conducted in accordance with Federal and/or Maryland law.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE STATEMENTS ABOVE.

DATE: _____ SIGNATURE: _____

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.00.

DATE: _____ SIGNATURE: _____