|  |  |
| --- | --- |
| **Name (Last , First)** |  |
| **Street Address** | **City** | **State** | **Zip** |
| **Phone Cell #**  | **Email**  |

**Departmental/Availability**

|  |  |
| --- | --- |
| **Desired position (Circle all that apply)** **Living History Food Service Retail** | **Days available (Circle all that apply)****Mon Tue Wed Thu Fri Sat** |
| **Are you currently employed?** **Yes No** | **Date you can start** | **Open to minimum wage?** **Yes No** | **Have you ever served in the** **US Military? Yes No** |

**Education**

|  |  |  |  |
| --- | --- | --- | --- |
| **School Name** |  **Location** | **Major/Area(s) of Study** | **Degree** |
|  |  |  |  |
|  |  |  |  |

**Work History**

|  |  |  |
| --- | --- | --- |
| **Company Name** | **Location** | **Phone** |
| **Title of Position Held**  | **Starting date**  | **Ending Date**  |
| **Supervisor/Manager Name** | **Starting Wage/Salary** **$**  | **Ending Wage/ Salary** **$**  |
| **Reason for leaving** | **Are you eligible for rehire?** |

|  |  |  |
| --- | --- | --- |
| **Company Name** | **Location** | **Phone** |
| **Title of Position Held**  | **Starting date**  | **Ending Date**  |
| **Supervisor/Manager Name** | **Starting Wage/Salary** **$**  | **Ending Wage/ Salary** **$**  |
| **Reason for leaving** | **Are you eligible for rehire?** |

**Were you referred by a Riley’s Farm employee? Yes No Employee Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact**

**Please list the name and phone number of who to contact in case of an emergency**

|  |  |  |
| --- | --- | --- |
| **Name** | **Relation**  | **Phone Number** |
| **Name** | **Relation**  | **Phone Number** |

**Background Check Authorization**

**I authorize without reservation, any party or agency contacted by Riley’s Farm to furnish the above mentioned information.**

**I release BACKGROUND NETWORK, INC and any other person and/or agencies from any suits, liens, judgments, damage and/or liability resulting. The above information is used solely for inquiries and criminal history checks.**

**Falsifying any information on this release form will constitute grounds for immediate dismissal or declining any pending employment offers from Riley’s Farm.**

**Have you ever been convicted of a crime other than a minor traffic violation? Yes\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_\_**

**If YES, provide the following:**

**Year of Conviction \_\_\_\_\_\_\_\_\_\_ County of Conviction\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Offense \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**X**

**Signature Date**

**Drug Screen Release Authorization**

**I understand that any offer of employment by Riley’s Farm is conditional upon my submitting to and passing a drug test. I hereby consent to submitting to any such post-offer test, and I authorize the doctor(s) or clinic(s) designated by Riley’s Farm to release the results of such test to Riley’s Farm.**

**I agree to hold harmless all parties involved in said screening. I agree not to take any legal action against, nor hold Riley’s Farm or their clients responsible for any alleged harm to me, including, but not limited to: preventing me from obtaining any form of employment or continuing employment for not submitting to the tests or as a result of the report from the tests. This includes possible clerical or laboratory error.**

**I understand that while employed by Riley’s Farm I may be required to submit to a drug test whenever reasonable suspicion exists that I may be under the influence of drugs, alcohol or any other substance, and I hereby consent to submitting to such a test. Without limiting in any way the range of factors, events or situations that might constitute such reasonable suspicion, I understand and agree that my being involved in any workplace accident or injury that Riley’s Farm cannot promptly and reasonably conclude was not in any way attributable to the use of alcohol, drugs or any illegal or controlled substance will constitute reasonable suspicion.**

**X**

**Print Name Signature Date**

**Authorization of Release for Media**

**If and when employed with or by Riley’s Farm, I willingly grant Riley’s Farm the right to use my image and/or voice in video, film, and/or still photography for marketing purposes without compensation specific to the use of said image.**

**X**

**Print Name Signature Date**

**Food Handlers Card**

**If and when employed with or by Riley’s Farm, I will obtain and keep an up to date food handlers card from the country of San Bernardino.**

**X**

**Print Name Signature Date**

**Live Scan**

**If and when employed with or by Riley’s Farm, I will obtain and keep an up to date live scan form if requested by Riley’s Farm.**

**X**

**Print Name Signature Date**

Photography Release

In consideration of my engagement as a model and actor, and for other good and valuable consideration herein acknowledged as received, I hereby grant the following rights and permissions to Riley’s American Heritage Farms, Inc. ("Photographer"),his/her heirs, legal representatives, and assigns, those for whom Photographer is acting, and those acting with his/her authority and permission. They have the irrevocable, perpetual and unrestricted right and permission to take, use, re-use, publish, and republish photographic portraits or pictures and audio recordings of me or in which I may be included, in whole or in part, or composite or distorted in character or form, without restriction as to changes or alterations, in conjunction with my own or a fictitious name, or reproductions thereof in color or otherwise, made through any medium at his/her studios or elsewhere, and in any and all media now or hereafter known, specifically including but not limited to print media and distribution over the internet for illustration, promotion, art, editorial, advertising, trade, or any other purpose whatsoever. I specifically consent to the digital compositing or distortion of the portraits or pictures, including without restriction any changes or alterations as to color, size, shape, perspective, context, foreground or background. I also consent to the use of any published matter in conjunction with such photographs. I hereby waive any right that I may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection with them or the use to which they may be applied. I hereby release, discharge, and agree to hold harmless Photographer, his/her heirs, legal representatives, and assigns, and all persons acting under his/her permission or authority or those for whom he/she is acting, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of such photographs or in any subsequent processing of them, as well as any publication of them, including without limitation any claims for libel or violation of any right of publicity or privacy. I hereby warrant that I am of full age and have the right to contract in my own name. I have read the above authorization, release, and agreement, prior to its execution, and I am fully familiar with the contents of this document. This document shall be binding upon me and my heirs, legal representatives, and assigns.

|  |  |  |
| --- | --- | --- |
| X | MODEL'S SIGNATURETODAY'S DATE |   |
|   | PRINT NAME |   |