



Natural Foods & Holistic Medicine

1 N. Indian Hill Blvd, Ste 101 & 102  
 Claremont, CA. 91711  
 Tel & Fax (909)624-4755

**For Office Use Only**

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

Work Availability: \_\_\_\_\_

Related Experience: \_\_\_\_\_

Remarks:

**Personal Information**

Name \_\_\_\_\_ E-mail address \_\_\_\_\_

Present address \_\_\_\_\_ Phone number \_\_\_\_\_

Permanent address \_\_\_\_\_ Phone number \_\_\_\_\_

Social security number \_\_\_\_\_ Are you a U.S. citizen? \_\_\_\_\_

Referred by: Newspaper \_\_\_\_\_ Store Sign \_\_\_\_\_ Staff Worker \_\_\_\_\_ Other \_\_\_\_\_

Position \_\_\_\_\_ Date you can start \_\_\_\_\_

**History**

Name and Location                      Years Attended                      Date Graduated                      Subjects Studied

High School \_\_\_\_\_

College \_\_\_\_\_

Other \_\_\_\_\_

Special Interests/Study \_\_\_\_\_

**Employment Experience** (List last three employers, starting with the most recent)

Date	Name and Address of employer	Salary	Position	Reason for Leaving
From				
To				
From				
To				
From				
To				

**References**

Name \_\_\_\_\_ Contact Info \_\_\_\_\_ Business \_\_\_\_\_ Years known \_\_\_\_\_

Name \_\_\_\_\_ Contact Info \_\_\_\_\_ Business \_\_\_\_\_ Years known \_\_\_\_\_

Name \_\_\_\_\_ Contact Info \_\_\_\_\_ Business \_\_\_\_\_ Years known \_\_\_\_\_

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

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