



**APPLICATION FOR EMPLOYMENT  
NATURALLY FRESH, INC.  
1000 Naturally Fresh Blvd.  
Atlanta, Georgia 30349**

AN EQUAL OPPORTUNITY EMPLOYER

**PERSONAL DATA**

LAST NAME FIRST MIDDLE INITIAL

CURRENT ADDRESS			PERMANENT ADDRESS		
Street			Street		
City	State	Zip	City	State	Zip
Telephone – Area Code ( )		Number	Telephone – Area Code ( )		Number

**EMPLOYMENT INFORMATION**

Position(s) Applied For Salary Desired Type of Employment Desired  
\$ Per Week  Full Time  Part Time

Please Initial

*I understand that an offer of employment, and my continued employment with Naturally Fresh are contingent upon satisfactory proof of my authorization to work in the United States.*

Are you 18 years of age or over?  Yes  No

Can you travel if a job requires it?  Yes  No If yes, please specify %:

Have you ever been employed by Naturally Fresh? If yes, please specify location(s) and dates of employment.

Location(s) \_\_\_\_\_ Dates \_\_\_\_\_

Have you ever previously applied for a position with Naturally Fresh?

Location(s) \_\_\_\_\_ Dates \_\_\_\_\_

How were you referred to Naturally Fresh?

When could you be available to begin work?

**EDUCATION AND TRAINING**

Type of School	Name & Address of School	Dates Attended (Optional)		Graduated		Type of Degree	Minor/Major
		From mo/yr	To mo/yr	Yes	No	Diploma or Certificate	Field of Study
High School							
College or University							
Other Education or Training							

Academic Achievements and Activities: Please list academic honors, scholarships or fellowships; memberships in academic honorary societies; or participation in or offices held in extracurricular activities you consider significant.

**SECURITY DATA**

Have you ever been convicted of a crime? (This includes traffic offenses resulting in convictions.)  Yes  No

If yes, please briefly describe the circumstances of your conviction(s), indicating the date(s), nature and place of the offense(s), and disposition of the case(s). (Convictions will not necessarily disqualify an applicant.)

## EMPLOYMENT EXPERIENCE

Please list your job history for the past five years\* (or last three employers). Start with your present status and note any periods in which you were not employed. Include U.S. military service, previous Naturally Fresh experience, summer/part-time jobs, and cooperative education assignments.

Company Name and Address	Dates Employed		Base Rate of Pay	Position Title and Description of Duties	Reason for Leaving
	Month	Year			
	From		Starting \$ Per		
			Final \$ Per		
Telephone ( )	To				Supervisor
	From		Starting \$ Per		
			Final \$ Per		
Telephone ( )	To				Supervisor
	From		Starting \$ Per		
			Final \$ Per		
Telephone ( )	To				Supervisor

Do you have any objections to our contacting your present employer to verify the above?

- No, you may contact any time.       Do not contact now. You may contact at a later date. (Please specify e.g., after acceptance of an offer or a specific date, if appropriate.) \_\_\_\_\_

## PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

### NOTICE TO ALL APPLICANTS

In order to be considered for employment by Naturally Fresh, Inc., its subsidiaries, or affiliates (collectively referred to ("The Company") you must agree to the terms and conditions of the Company's Agreement To Mediate and/or Arbitrate Employment-Related Disputes ("ADR Agreement").

- The information that I have provided is accurate to the best of my knowledge and subject to validation by Naturally Fresh.
- I authorize the persons, schools, current employer (if approved by me in the Employment Experience Section) and other organizations or employers named in this application to provide Naturally Fresh with any relevant information that may be required to arrive at an employment decision and release prior employers of any liability for providing information to Naturally Fresh.
- I understand and agree that any material misrepresentation or deliberate omission of a fact in my application will be justification for refusal or, if employed, termination by Naturally Fresh.
- I understand that nothing contained in the employment application or in the granting of an interview is intended to create an employment contract between Naturally Fresh, Inc. and myself for either employment or for the providing of any benefit. No promises regarding continued employment have been made to me, and I understand that no such promises or guarantee is binding upon Naturally Fresh unless made in writing.
- I understand my employment can be terminated with or without cause and with or without notice at any time at the option of either the Company or myself.
- I further understand that the terms and conditions of employment may be changed at any time without notice by the Company.
- I understand that I may be required to take one or more physical exams, blood tests and/or drug screening test(s) as a condition of hiring or continued employment. I agree to consent to take test(s) as such time as designated by Naturally Fresh, Inc. and to release Naturally Fresh, its directors, officers, agents or employees from any claim arising with the use of such test(s).
- The Fair Credit Reporting Act requires that we advise you that as part of our employment screening and selection procedure a background investigation may be conducted before an offer of employment is extended. Upon your written request, additional information as to the nature and scope of the report, if one is made, will be provided. In addition, if a report is made you have the right to request the details of the report directly from the reporting agency.
- I understand that I am required as a condition of hiring or continued employment to agree to sign and accept the Company's ADR Agreement.
- My signature below is acknowledgement that I agree to the above-stated terms and conditions of employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Name

Naturally Fresh does not discriminate in hiring or employment on the basis of race, color, religion, national origin, sex, age, disability, or veteran status. No question on this application is intended to secure information to be used for such discrimination.

**THIS APPLICATION WILL RECEIVE ACTIVE CONSIDERATION FOR 60 DAYS FOR POSITION APPLIED FOR**

## EMPLOYMENT DATA RECORD

Employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or disability, or any other legally protected status.

As an employer with an Affirmative Action Program, we comply with government regulations, including Affirmative Action responsibilities where they apply.

The purpose for this Data Record is to comply with government record keeping, reporting, and other legal requirements. Periodic Reports are made to the government on the following information. The completion of this Data Record is optional. If you choose to volunteer the requested information, it will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders and regulations.

**Please note: Your cooperation is voluntary.** Inclusion or exclusion of any data will not affect any employment decision.

### VOLUNTARY SURVEY (PLEASE PRINT)

Date: \_\_\_\_\_

Government agencies at times require periodic reports on the sex, ethnicity, disability, veteran and other protected status of employees. This data is for statistical analysis with respect to the success of the Affirmative Action Program. Submission of this information is voluntary.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Social Security Number

Check One:

Male

Female

Check One of the Following: (Ethnic Origin)

White

Hispanic or Latino

American Indian or Alaska Native

Black or African American

Asian

Native Hawaiian or Other Pacific Islander

Two or more races

Check Any that Apply:

Vietnam Era Veteran

\*Other Veteran

\*If other veteran, please specify if served in a war or other military campaign.



**Georgia Bureau of Investigation  
Georgia Crime Information Center**

**Consent Form**

**Sterling InfoSystems, Inc**

I hereby authorize \_\_\_\_\_  
to receive any Georgia criminal history record information pertaining to me which may be in the  
files of any state or local criminal justice agency in Georgia.

\_\_\_\_\_  
**Full Name (print)**

\_\_\_\_\_  
**Address**

\_\_\_\_\_  
**Sex**

\_\_\_\_\_  
**Race**

\_\_\_\_\_  
**Date of Birth**

\_\_\_\_\_  
**Social Security Number**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Special employment provisions (check if applicable):**

- Employment with mentally disabled (Purpose code 'M')
- Employment with elder care (Purpose code 'N')
- Employment with children (Purpose code 'W')
- Employment with criminal justice agency – non-sworn (Purpose code 'J')
- Employment with criminal justice agency – sworn (Purpose code 'Z')

**One of the following must be checked:**

- This authorization is valid for 90/180/\_\_\_\_ (circle one) days from date of signature.
- I, \_\_\_\_\_ give consent to the above  
named to perform periodic criminal history background checks for the duration of my  
employment with this company.



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[Grid for Office Use Only - Group ID (optional)]

For Office Use Only - Group ID (optional)

[Grid for Office Use Only - User ID (optional)]

For Office Use Only - User ID (optional)

[Grid for Office Use Only - Location / Store # (optional)]

For Office Use Only - Location / Store # (optional)

PLEASE COMPLETE THIS SECTION.

[Grid for First Name]

First Name

[Grid for Middle Name or Initial]

Middle Name or Initial

[Grid for Last Name]

Last Name

[Grid for Date of Birth (MMDDYYYY)]

Date of Birth (MMDDYYYY)

[Grid for Other Names Known By]

Other Names Known By

Male

Female

[Grid for Social Security Number]

Social Security Number

[Grid for Primary Telephone Number (no dashes)]

Primary Telephone Number (no dashes)

[Grid for Current Address]

Current Address

[Grid for Apt #]

Apt #

#yrs at this address

[Grid for City]

City

[Grid for State]

State

[Grid for Zip Code]

Zip Code

[Grid for Previous Address]

Previous Address

[Grid for Apt #]

Apt #

#yrs at this address

[Grid for City]

City

[Grid for State]

State

[Grid for Zip Code]

Zip Code

[Grid for Driver's License Number (no dashes)]

Driver's License Number (no dashes)

[Grid for License State]

License State

[Grid for Email Address]

Email Address

[Grid for Signature]

Signature

[Grid for Today's Date (MMDDYYYY)]

Today's Date (MMDDYYYY)



Para informacion en espanol, visite <http://www.ftc.gov/credit> o escriba a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to <http://www.ftc.gov/credit> or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See <http://www.ftc.gov/credit> for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See <http://www.ftc.gov/credit> for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer-reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).



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**You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

**FOR QUESTIONS OR CONCERNS REGARDING**

**PLEASE CONTACT**

Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission Consumer Response Center- FCRA Washington, DC 20580 - 877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 - 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 - 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Programs Washington D.C. 20552 - 800- 842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 - 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Division of Compliance & Consumer Affairs Washington, DC 20429 - 877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20590 - 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator-GIPSA Washington, DC 20250 - 202-720-7051