

LYKES BROS. INC. and/or Subsidiary or Affiliated Companies

APPLICATION FOR AT-WILL EMPLOYMENT

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT, but merely is intended to provide information necessary to evaluate suitability for employment. It is the policy of the company to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, disability (physical or mental), genetic information, sexual orientation, gender identity or expression, familial status, veteran status, citizenship status or any other status protected under state, federal or local law. If a job offer is made, start of work or continued employment (if applicant has begun work) is contingent upon the successful completion of a drug test and a background check which includes a social security number check. In addition, some positions may require pre-employment testing (physical or applied), to determine the suitability of the applicant for the job's essential functions. Lykes Bros. Inc. and/or subsidiary or affiliated companies do not hire tobacco smokers and if hired, you must not smoke tobacco during your tenure with the company. Lykes Bros. Inc. and/or subsidiary or affiliated companies are Drug-Free Workplaces. This application will remain active for 60 days.

PERSONAL INFORMATION

Name: <u>Last</u>		<u>First</u>	<u>Middle Initial</u>
Phone Numbers:	Cell: Work:	Home:	Preferred Contact Number Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>
			Best time of day to call Day <input type="checkbox"/> Evening <input type="checkbox"/>

Please list below your current address and your two other most recent previous addresses:

<u>Current</u>	<u>Street</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	<u>Since (Mo/Yr)</u>
Street		City	State	Zip	Since (Mo/Yr)

EMPLOYMENT INFORMATION

Lykes Company, Subsidiary or Affiliated Company Applying With: _____ (Example: Lykes Bros. Inc., Lykes Citrus Division, New Harvest, Lykes Insurance, Lykes Ranch, etc.)	Date You Can Start Work: _____	Desired Salary/ or Hourly Rate of Pay: \$ _____
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Position(s) Applying For:
 _____, _____

Applying for: **Full-Time** **Part-Time**

Please answer all of the following questions.

- 1) Are you at least 18 years of age and legally eligible to work in the United States? YES NO

- 2) This job may require shift work, overtime and/or work on Saturdays and Sundays. Will you be able to work outside of the regular scheduled shift as needed? YES NO (If no, please explain)

- 3) Do you understand the essential job functions and requirements as described? YES NO (If no, please explain)

- 4) Have you ever worked for Lykes Bros. Inc. and/or a subsidiary or affiliated company? YES NO (If yes, please provide dates employed, company or affiliate/subsidiary, supervisor name and reason for leaving)

- 5) Do you have any relatives working for Lykes Bros. Inc. and/or Subsidiary or Affiliated companies? YES NO (If yes, name and relationship)

- 6) Are you currently bound by a noncompetition or trade secret agreement? YES NO (If yes, please explain)

- 7) Have you ever been discharged or asked to resign from a job? YES NO (If yes, please explain)

- 8) In the past seven years, have you been convicted of or pled guilty or nolo contendere to a felony or misdemeanor? YES NO
 (If yes, please explain)

NOTE: A "YES" answer to this question will not automatically bar you from employment. The nature, job-relatedness, severity and date of the offense in relation to the position for which you are applying are considered.

- 9) Are you a Veteran of any branch of the United States Military? If yes, members of the military may be eligible for Veterans' preference consideration.
 YES NO

EDUCATION

High School Attended	City, County & State	Did you earn a Diploma?
Undergraduate College Attended	City, State	Areas of Study
Graduate School Attended	City, State	Areas of Study
Trade, Business or Other School	City, State	Areas of Study

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EMPLOYMENT HISTORY

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES NO

Please list below your last three employers beginning with the most recent:

Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor
Duties		Reason for Leaving		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor
Duties		Reason for Leaving		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To	Pay Rate Upon Leaving \$		Supervisor

JOB-RELATED SKILLS

If the position you are applying for requires driving a motor vehicle on behalf of the company, please answer the following questions:

1. Do you have a valid Florida driver's license? YES NO
2. Have you been convicted of or pled guilty to any traffic-related offense other than parking ticket(s) within the past five years? YES NO
(If yes, list offense(s) and date(s) of offense(s) _____)
3. Have you had your driver's license suspended or revoked, or had your driving privileges modified by a court of law? YES NO (If yes, explain and provide date(s). _____)

Please use this space to list any special skills you may have that relate to the position applied for:

Please list any professional licenses, designations, certifications, etc. that may relate to the position applied for. Include date granted, name of organization, and any other relevant information: _____

APPLICANT'S CERTIFICATION AGREEMENT

1. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
2. I authorize the investigation of all statements contained in this application and release from all liability any persons or employers supplying such information, and I also release the company from all liability that might result from making the investigation.
3. If I am offered and accept a position, I agree to conform to all existing and future Company rules and regulations and I understand that the Company reserves the right to change wages, hours and working conditions as deemed necessary. ***I ALSO UNDERSTAND THAT, IF HIRED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME.***
4. I understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.
5. I understand that although management attempts to accommodate individual circumstances including religious observance requests, the needs of the business may preclude approval of accommodation requests.
6. If Veterans preference consideration is requested, it is not a guarantee of employment. All established Veterans preference criteria must be met and the applicant must possess the education, skills and abilities required of the position.
7. I have read and reviewed the information provided, or if I am unable to read/and or write have been assisted in completing this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Note: If this application was completed by someone other than applicant, please indicate the name(s) and relationship(s) of person(s) assisting below.

Signature of Applicant or Person Assisting Applicant Date