

# Smart & Final®

## EMPLOYMENT APPLICATION

As an EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER, SMART & FINAL STORES LLC ("Smart & Final") does not discriminate against applicants or employees because of their age, race, color, religion, national origin, sexual orientation, sex, (except where sex is a bonafide occupational qualification) or on any other basis prohibited by applicable state or federal laws. Furthermore, Smart & Final will not discriminate against any applicant or employee because he or she has a physical or mental disability, is a disabled veteran, or a veteran of the Vietnam era, provided he or she is qualified and meets the requirements established by SMART & FINAL for the job.

We appreciate your interest in Smart & Final. Please complete this form in its entirety and remember to type or print clearly.

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Email Address \_\_\_\_\_

Position Applying For: \_\_\_\_\_

Location:  Corporate  Distribution Center  Store # \_\_\_\_\_  Other \_\_\_\_\_

Referred By:  Newspaper  Friend  Relative  Employment Agency  Other: \_\_\_\_\_

|  |  |
|--|--|
| Can you, after employment, submit verification of your legal right to work in the United States?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | Are you at least age 16? <input type="checkbox"/> YES <input type="checkbox"/> NO<br>Are you under the age of 18? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Have you filed an application or been employed here before?<br><input type="checkbox"/> YES, date: _____ <input type="checkbox"/> NO<br>Where (Location)?    | On what day are you available to start work?   |
| Are you known to school/references/work by another name?<br><input type="checkbox"/> YES <input type="checkbox"/> NO   | If yes, what name(s)?  |
| Part Time <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/>   | What days/hours can you work?  |
| Computer skills (please list):   | Foreign languages (indicate proficiency)   |

### EDUCATION

| Name & Location                   | Last Grade Completed | Major | Minor | Degree/Date |
|-----------------------------------|----------------------|-------|-------|-------------|
| High School                       | 9 10 11 12           |       |       | X           |
| College                           | 1 2 3 4              |       |       |             |
| Graduate                          | 1 2 3 4              |       |       |             |
| Technical<br>Business<br>Or Other |                      |       |       |             |

Attended college but did not graduate, explain: \_\_\_\_\_

# WORK HISTORY

List in order with MOST RECENT employer FIRST  
(Please account for all time, including time not working)

|                     |                        |                               |  |        |              |
|---------------------|------------------------|-------------------------------|--|--------|--------------|
| Company Name:       |                        | Address:                      |  | Phone: | Wage/Salary: |
| From MO/YR:         | Job Title:             | All former supervisors names: |  | Title: |              |
| To MO/YR:           | Description of duties: |                               |  |        |              |
| Reason for leaving: |                        |                               |  |        |              |

|                     |                        |                               |  |        |              |
|---------------------|------------------------|-------------------------------|--|--------|--------------|
| Company Name:       |                        | Address:                      |  | Phone: | Wage/Salary: |
| From MO/YR:         | Job Title:             | All former supervisors names: |  | Title: |              |
| To MO/YR:           | Description of duties: |                               |  |        |              |
| Reason for leaving: |                        |                               |  |        |              |

|                     |                        |                               |  |        |              |
|---------------------|------------------------|-------------------------------|--|--------|--------------|
| Company Name:       |                        | Address:                      |  | Phone: | Wage/Salary: |
| From MO/YR:         | Job Title:             | All former supervisors names: |  | Title: |              |
| To MO/YR:           | Description of duties: |                               |  |        |              |
| Reason for leaving: |                        |                               |  |        |              |

|                     |                        |                               |  |        |              |
|---------------------|------------------------|-------------------------------|--|--------|--------------|
| Company Name:       |                        | Address:                      |  | Phone: | Wage/Salary: |
| From MO/YR:         | Job Title:             | All former supervisors names: |  | Title: |              |
| To MO/YR:           | Description of duties: |                               |  |        |              |
| Reason for leaving: |                        |                               |  |        |              |

Our employment process includes verification of employment history and educational qualification.  
Indicate any employers/educational institutions we should not contact and why:

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Do you have any relatives or do you know anyone employed at Smart & Final?

YES  NO If yes, give name, relationship and work location: \_\_\_\_\_

Are you licensed to practice any trade or profession?

YES  NO If yes, state nature of license, issuing authority and date: \_\_\_\_\_

Are you able, with or without reasonable accommodation, to perform the tasks and functions of the position for which you are applying competently and without endangering the health and safety of yourself and/or others?  YES  NO

Do you possess a valid current driver's license (only for jobs requiring driving a vehicle)?  YES  NO

Driver's license number and state: \_\_\_\_\_

List any clubs, organizations, societies, or professional groups to which you belong which have a direct bearing upon your qualifications for the job, which you are seeking:

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List any hobbies or interests, which have a direct bearing on the job for which you are applying:

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List any special skills or abilities, which directly relate to the job for which you are applying:

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List business references who have knowledge of your **employment and professional competence**. Attempt to give those who were superior to you. Otherwise, list those who were on an equal level, and subordinates to you. Do not list relatives.

| Name | Business Relationship | Title | Company | Phone |
|------|-----------------------|-------|---------|-------|
| 1.   |                       |       |         |       |
| 2.   |                       |       |         |       |
| 3.   |                       |       |         |       |

## PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

\_\_\_ I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation/verification, including a background check, of all information contained in this application unless I have indicated to the contrary. I understand that any misrepresentation, falsification, or material omission of information on this application may result in disqualification from employment or, if I am hired, in my immediate dismissal from employment.

\_\_\_ I understand that an offer of employment will be contingent upon satisfactorily passing a drug and alcohol test, and may include a physical examination. I hereby authorize and consent to any physical examination or drug and alcohol test during my employment with Smart & Final Stores LLC ("Smart & Final" or "the Company") which may be required by law or is otherwise permitted by law. I authorize all providers of healthcare who examine me to disclose to the Company or its agents, medical information bearing upon my fitness for duty. I further authorize the Company to disclose information concerning my fitness for duty, if at any time my medical condition is put at issue in any proceeding by others or myself. In the event that I have a disability which may affect my ability to take the physical examination, I will so inform the Company so that a reasonable accommodation can be made. The Company reserves the right to require medical documentation concerning the need for accommodation.

\_\_\_ I understand that all offers of employment are contingent upon accepting and signing the Smart & Final Arbitration Agreement.

\_\_\_ I understand and acknowledge that my employment relationship with Smart & Final is of an "at will" nature, which means that I have the right to terminate my employment with Smart & Final at any time, with or without reason, and that Smart & Final has the right to terminate my employment at any time, with or without notice. It is further understood that this "at will" employment relationship may not be changed by any verbal statement, conduct or by a written document, except one specifically acknowledging the change in a legally binding, written contract covering employee status. An example of this would be a written employment agreement for a specific duration of time. I agree that this shall constitute a final and fully binding integrated agreement with respect to the "at will" nature of my employment relationship and that there are no oral or collateral agreements regarding this issue.

\_\_\_ I authorize any person, school, current employer (except as expressly noted), past employer(s), and organizations named in this application form (and accompanying resume or other documentation, if any) to provide the Company with information, that may be useful in making a hiring decision. I release all parties from all liability for any damage that may result from furnishing information, which is truthful, without malice, or made in good faith to you.

\_\_\_ In consideration of employment, I agree to obey the rules and standards of the Company. I understand that nothing contained in this application or the interview process is intended to create a contract between the Company and myself for either continued employment or for the providing of benefits.

\_\_\_ I understand that all offers of employment are conditioned upon my providing satisfactory documentary proof of my identity and legal right to work in the United States.

\_\_\_ I understand that this application shall only remain active for 60 days. After 60 days, if I am still interested in employment at Smart & Final, I must fill out a new application.

\_\_\_ I hereby acknowledge that I have read the above statements and understand them. I certify that I, the undersigned applicant, have personally completed this application. I declare under penalty of perjury that the facts contained in this application (or any resume or other documents submitted) are true and complete to the best of my knowledge. I also understand and agree that any misrepresentation, falsification or material omission of information on this application may, at anytime, result in my failure to receive an offer or, if I am hired, my subsequent dismissal from employment.

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Applicant's Signature

Date