

Application for Employment

T. A. Solberg Co., Inc. is an equal opportunity employer and fully subscribes to the principles of equal employment opportunity. It is our policy to provide employment, compensation and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, or disability, or any other basis prohibited by Federal or State law. As an equal opportunity employer, this company intends to comply with all Federal and State laws and the information requested on this application will not be used for any purpose prohibited by law.

***APPLICATIONS ARE GENERALLY REVIEWED ON A TIMELY BASIS**

***APPLICANTS ARE GENERALLY EXPECTED TO BE AVAILABLE DURING ALL 12 MONTHS OF THE YEAR**

***IF YOU DO NOT HEAR FROM US WITHIN 60 DAYS, PLEASE SUBMIT A NEW APPLICATION**

Store Location

Please check the store for which you are applying. Return completed application to the address listed.

___ **Trig's – Eagle River:** 925 E. Wall Street, PO Box 1059, Eagle River, WI 54521, (715) 479-6411

___ **Trig's – Minocqua:** 9750 Highway 70 West, PO Box 50, Minocqua, WI 54548, (715) 356-7711

___ **Trig's – Rhinelander:** 232 S. Courtney Street, Rhinelander, WI 54501, (715) 369-1470

___ **Trig's – Wausau:** 110 S. 17th Avenue, Wausau, WI 54401, (715) 849-8744

___ **Point County Market:** 1600 Academy Avenue, Stevens Point, WI 54481. (715) 341-0200

Personal

Name: _____ Date: _____

Current Address: _____ City: _____

State / Zip: _____ Phone: _____

Phone number where we can reach you during the day: _____

If you are under 18, please state age and date of birth: _____

Are you either: (1) a U.S. citizen or, if not, (2) do you currently have lawful employment authorization which permits you to work for the Company without the Company having to take any action, either upon employment, or at any date in the future, to ensure or assist you in maintaining lawful employment authorization to work for the Company? ___ Yes ___ No

If your answer was "Yes," answer the following question: Are you a student on a temporary visa?
___ Yes ___ No Proof of authorization to work will be required if you are employed by T.A. Solberg Co., Inc.

Have you ever applied to the company before: _____ If yes, when and under what name:

Have you ever worked with us before? _____ If yes, when, where, and under what name:

Application for Employment

General

Position(s) applied for: List top 3 choices: *Examples: Cashier, Deli, Bakery, Stocker, Bagger*

Position: _____ Desired Rate of Pay: _____

Position: _____ Desired Rate of Pay: _____

Position: _____ Desired Rate of Pay: _____

Please indicate which type of employment interest you:

☐ Regular Full-time ☐ Regular Part-time ☐ Temporary Full-time ☐ Temporary Part-time

If interested in temporary employment, please specify dates: _____

List times available next to each day (ex. Mon: 3pm to 10pm) – (This does not guarantee any specific hours. Opportunities available based on flexibility.)

Sun: _____ Mon: _____ Tues: _____ Wed: _____

Thurs: _____ Fri: _____ Sat: _____

On occasion, we work more than 8 hours per day and most holidays -- is that a problem? Yes ☐ No ☐
The Company will attempt to reasonably accommodate an applicant's religious needs, as required by law.

Do you have transportation to work? Yes ☐ No ☐

Why are you applying for this position: _____

How did you learn of this company: _____

Are you presently employed: ☐ If yes, why do you seek to change your employment: _____

Are you on layoff and subject to recall: ☐ If yes, When is the possible recall date: _____

List any family or friends working with us:

Name: _____ Name: _____

Location: _____ Location: _____

Department: _____ Department: _____

Criminal And Other Offenses

(1) Have you ever been convicted of, plead no contest to, or been fined in connection with any felony, misdemeanor, municipal ordinance violation, or any other type of offense (other than a parking ticket), regardless of the nature of the penalty or fine for that offense? Yes ☐ No ☐ If Yes, provide details: _____

(If you are in doubt about the nature of any offense, please list; this question is designed to require disclosure of all past convictions, violations, fines or offenses, and the failure to list a conviction, offense, violation or fine will be considered falsification and will be grounds for refusal to hire or termination of employment. However, no

Application for Employment

applicant will be denied a position because of a past conviction, offense, violation or fine, which is not substantially related to the circumstances of the employment sought.)

(2) Are you currently subject to a pending criminal charge for any misdemeanor or felony? Yes _____ No _____
If Yes, provide details: _____

(This question is designed to obtain information on all pending criminal charges, whether felony or misdemeanor. However, no applicant will be denied a position because of a pending criminal charge which is not substantially related to the circumstances of the employment sought.)

Education

Highest Level of Education Completed 8 9 10 11 12 13 14 15 16 17+
Did you Graduate? ____ Yes ____ No Degree/Diploma/Certificate _____

Please list any academic honors you have received that you believe relate to the job or jobs for which you are applying:

Employment History

Start with most recent employer. If necessary, use reverse side of additional sheets to list additional employers.
Present or Last Employer:

Name: _____ Phone: _____

Address: _____ Employed: From: _____ To: _____

Supervisor: _____ Wage: Start: _____ Last: _____

What did you do there: _____ Reason for Leaving: _____

If this is your current employer, may we contact for a reference? Yes ____ No ____

Next Previous Employer:

Name: _____ Phone: _____

Address: _____ Employed: From: _____ To: _____

Supervisor: _____ Wage: Start: _____ Last: _____

What did you do there: _____ Reason for Leaving: _____

Next Previous Employer:

Name: _____ Phone: _____

Address: _____ Employed: From: _____ To: _____

Supervisor: _____ Wage: Start: _____ Last: _____

What did you do there: _____ Reason for Leaving: _____

Application for Employment

Next Previous Employer:

Name: _____ Phone: _____

Address: _____ Employed: From: _____ To: _____

Supervisor: _____ Wage: Start: _____ Last: _____

What did you do there: _____ Reason for Leaving: _____

References

Give the names of three persons not related to you, whom you have known at least one year.

Name

Address

Business

1. _____
2. _____
3. _____

Employment Agreements

Are you subject to any employment agreement or post-employment agreement with any other employer (including, but not limited to, employment contracts, non-compete agreements, intellectual property rights agreements and/or confidentiality agreements)? Yes _____ No _____ If yes, attach a complete and accurate copy of each agreement.

READ, UNDERSTAND, SIGN AND DATE IF YOU AGREE

I certify that the facts set forth in this application are true, correct and complete without misrepresentations or omissions of any kind whatsoever. I authorize investigation of the statements I have made herein.

I hereby release from any and all liability all representatives of T.A. Solberg Co., Inc. for their acts performed in connection with evaluating my application, background, credentials and qualifications. I hereby further authorize any party (including the companies, schools and organizations listed in this application form) to release any information they may have about me to T.A. Solberg Co., Inc., including all of my personnel records with prior employers. I also release all persons, companies, schools and organizations (and all persons connected with them) who provide such information to T.A. Solberg Co., Inc. from any and all liability for any damage for giving this information. I understand that if any of the information on this application form is discovered to be incorrect, false or misleading or if there are any misrepresentations or omissions of any kind whatsoever, then T.A. Solberg Co., Inc. may deny me employment or terminate my employment, and I agree that T.A. Solberg Co., Inc. shall not be liable in any respect if it does so.

I understand that if I am employed by T.A. Solberg Co., Inc., any such employment is not binding on either party for any specific period of time. I further understand that no representative of T.A. Solberg Co., Inc., other than the President, has any authority to enter into any agreement for employment for any specified period of time. Any such agreement must be in writing and signed by the President. I understand that any other written or oral statement to the contrary, even if made by a supervisor, manager or officer of T.A. Solberg Co., Inc. is invalid and should not be relied on by me. I understand that if employed I will be an employee-at-will and that either T.A. Solberg Co., Inc. or I may terminate that employment relationship at any time, for any reason, with or without notice.

(Signature of Applicant)

(Date)

Application for Employment

AUTHORIZATION FOR REFERENCE CHECK

I am applying for employment with T.A. Solberg Co., Inc.. I hereby authorize any and all persons (including any and all employers with whom I have been employed, schools that I have attended and organizations with which I have been connected) to release any and all information they have about me to T.A. Solberg Co., Inc. This includes all of my personnel records with prior employers and any information about my performance during my employment with them and also includes all of my transcripts from any schools that I have attended. I hereby release all persons, companies, schools and organizations (and all persons connected with them) who provide such information to T.A. Solberg Co., Inc. from any and all liability for any damage for giving this information.

This Authorization shall remain in effect for a period of one (1) year from the date on which I sign it. A photocopy of this Authorization may be used by T.A. Solberg Co., Inc. and shall be as effective as the original.

Applicant's Name (please print)

Applicant's Signature

Date _____

Application for Employment

PLEASE READ THE FOLLOWING POLICIES CAREFULLY

LISTED BELOW IS OUR COMPANY DRESS CODE AS WELL AS OUR SMOKING POLICY :

- A WHITE SHIRT, TIE, APRON AND NAME BADGE ARE PROVIDED BY THE STORE
- JET-BLACK DRESS PANTS ARE TO BE WORN WITH THE UNIFORM SHIRT TUCKED IN. BLACK JEANS ARE NOT ALLOWED. SWEAT PANTS/SPANDEX PANTS ARE NOT ALLOWED. PANTS SHOULD BE ANKLE LENGTH. NO SHORTS ARE ALLOWED.
- SHOES MUST BE BLACK, LOW-HEELED, NON-SKID. NO EXTREME HEELS, OPEN TOES OR COWBOY BOOTS ARE PERMITTED. SNEAKERS ARE ALLOWED AS LONG AS THEY ARE ALL BLACK. (NO WHITE LETTERING OR SOLES) AND KEPT IN GOOD CONDITION. BLACK SOCKS OR HOSIERY MUST BE WORN.
- HAT/HAIRNETS ARE REQUIRED FOR APPLICABLE DEPARTMENTS
- BLACK SWEATERS MAY BE PURCHASED FROM THE STORE TO BE WORN DURING COLDER MONTHS.
- JEWELRY, IF WORN, IS TO BE OF CONSERVATIVE BUSINESS NATURE. EARRINGS ARE ALLOWED FOR WOMEN ONLY. MEN ARE PROHIBITED FROM WEARING EARRINGS. FACIAL AND TONGUE ADORNMENTS ARE NOT ACCEPTABLE. NAIL POLISH IS NOT ALLOWED TO BE WORN BY MEN. WOMEN MAY NOT WEAR NAIL POLISH IN APPLICABLE DEPARTMENTS.
- EXTREME HAIR COLOR, STYLES, OR MAKE UP ARE NOT PERMITTED. HAIR MUST BE CLEAN, NEAT, AND STYLED AWAY FROM YOUR FACE. HAIR CANNOT BE HANGING IN YOUR FACE OR COVERING YOUR NAME BADGE.
- **MEN:** FACIAL HAIR SHOULD BE WELL GROOMED AT ALL TIMES. HAIR SHOULD BE KEPT AT COLLAR LENGTH AND NEATLY GROOMED.
- GUM CHEWING, EATING OR DRINKING IN YOUR WORK AREA IS NOT PERMITTED
- A NAME BADGE IS REQUIRED AT ALL TIMES WHILE ON THE CLOCK
- IT IS THE ASSOCIATE'S RESPONSIBILITY TO KEEP THE SHIRT AND APRON NEAT AND CLEAN.

ASSOCIATES ARE NOT PERMITTED TO WEAR DIRTY, WRINKLED OR TORN SHIRTS OR APRONS.

OUR STORE HAS A NO SMOKING POLICY. USE OF ANY TOBACCO PRODUCTS WHILE ON THE CLOCK IS PROHIBITED. SMOKING IS NOT PERMITTED IN ANY COMPANY BUILDINGS, OUTSIDE ANY COMPANY BUILDINGS OR IN ANY COMPANY OWNED VEHICLES. IF YOU ARE A SMOKER, WE WILL ARRANGE FOR A ½ HOUR UNPAID LUNCH BREAK SO YOU MAY LEAVE THE BUILDING FOR A CIGARETTE BREAK IN YOUR PERSONAL VEHICLE OR OFF COMPANY PROPERTY.

I HAVE READ AND UNDERSTAND THE ABOVE POLICIES

SIGNATURE: _____ DATE: _____