



RANDALL'S FARM, INC.

631 Center Street (Rt. 21) • Ludlow, Massachusetts 01056

Telephone (413) 589-7971

Fax (413) 584-2046

RANDALL'S FARM EMPLOYMENT GUIDELINES

Randall's Farm and Greenhouse is open 364 days a year. Randall's is open 7 days a week. Randall's retail hours of operation are 7am-8pm or 9pm seasonally. Elsie's Creamery is open May-October 11am-9 or 10pm. Randall's pays competitive wages based on experience and position.

The busiest times at Randall's Farm and Greenhouse are Saturdays, Sundays, and Holiday periods. All employees are expected to share in the coverage during these peak times.

Randall's offers a comprehensive benefit package to employees who work 20 or more hours per week annually and have completed the 90 day probationary period successfully. This package includes Short-term disability, Long-term disability, and Life Insurance coverage paid by Randall's Farm.

Randall's offers both part-time and full-time employees Holiday and Vacation benefits under our policy guidelines. Full-time employees qualifying may participate in our 401k plan and health insurance.

-AGE- You must be at least 16 years of age to work in the creamery, as a cashier, in the produce department, or in a greenhouse position. You must be at least 18 years of age to work in the deli, or to sell alcohol and lottery tickets.

Randall's holds all active employment applications for 120 days. If you don't hear from us within 120 days, please re-apply.

The Finest in Fruit and Vegetables, Flowers and Plants
Bakery • Deli • Homemade Ice Cream

Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position(s) Applied For <small>(PLEASE PRINT)</small>		Date of Application
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____
Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever been employed with us before? Yes No

If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
Proof of citizenship or immigration status will be required upon employment. Yes No

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Do you have a dependable means of transportation to and from work? Yes No

Have you been convicted of a felony within the last 7 years?
Conviction will not necessarily disqualify an applicant from employment. Yes No

If Yes, please explain _____

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Additional Information

State any additional information you feel may be helpful to us in considering your application. Summarize special job-related skills & qualifications from employment or other experience.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. ___ YES ___ NO

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
	Job Title	Supervisor			
	Reason for Leaving				

References

1.	()	
	(Name)	Phone #
	(Address)	
2.	()	
	(Name)	Phone #
	(Address)	
3.	()	
	(Name)	Phone #
	(Address)	

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

 Signature of Applicant

 Date

This Application For Employment is sold for general use throughout the United States. Amsterdam Printing and Litho Corp. assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant, may violate State and/or Federal Law.

Randall's Farm

Preliminary Applicant Questions

Applicant Name _____

Date _____ Screener _____

1. What dept are you interested in working in?

2. What is your daily availability?

Sun -

Mon -

Tues -

Wed -

Thurs -

Fri -

Sat -

3. What about you would make you an effective Randall's Farm employee?