



# SALARIED EMPLOYMENT APPLICATION

**P.O. Box 839999, San Antonio, TX 78283-3999**  
AN EQUAL OPPORTUNITY EMPLOYER/DRUG FREE WORKPLACE

All questions must be answered for application to be valid - Write N/A or none where appropriate. Please attach additional pages if necessary.

## I. PERSONAL INFORMATION

Full Name \_\_\_\_\_ Date \_\_\_\_\_

Have you ever been employed under another name? Yes \_\_\_ No \_\_\_ If "yes", what was it? \_\_\_\_\_

Home address (in full) \_\_\_\_\_

Social security number \_\_\_\_\_ Phone Number \_\_\_\_\_

Position applying for: \_\_\_\_\_ Earnings expected \$ \_\_\_\_\_

Have you worked for H-E-B before? Yes \_\_\_ No \_\_\_ If "yes", please list below in **Business Experience** section.

Have you applied at H-E-B before? Yes \_\_\_ No \_\_\_ If "yes", position \_\_\_\_\_ location \_\_\_\_\_ dates \_\_\_\_\_

Can you perform the essential functions of the position for which you are applying with or without reasonable accommodation? Yes \_\_\_ No \_\_\_

Have you ever been discharged or disciplined by an employer for theft; harassment; discrimination; retaliation; disruptive behavior; using and/or possessing a weapon on company premises? Yes \_\_\_ No \_\_\_ If "yes", provide date(s) and details:

\_\_\_\_\_  
\_\_\_\_\_

Do you have any relatives working for H-E-B or one of its affiliates? Yes \_\_\_ No \_\_\_ If "yes", list their names, relationships, and where they work \_\_\_\_\_

If employed, can you submit verification of your legal right to work in the U.S.? Yes \_\_\_ No \_\_\_

What languages do you speak? \_\_\_\_\_ Fluently? \_\_\_\_\_

Have you ever been convicted or pled guilty, no contest or nolo contendere, or received deferred adjudication, pre-trial diversion or probation for one or more of the following: 1) any felony, 2) any crime involving violence or bodily injury; or 3) in the past 7 years, any misdemeanor, other than a minor traffic violation? Yes \_\_\_ No \_\_\_

If "yes", provide date(s) and details, including the nature of the offense and disposition of the case (NOTE: Answering "yes" will not necessarily disqualify an applicant from consideration for a particular job): \_\_\_\_\_

\_\_\_\_\_

## II. BUSINESS EXPERIENCE

Please start with present position and include all experience with H-E-B, in the U.S. Military, and any self-employment.

- A.** Company \_\_\_\_\_ Address \_\_\_\_\_ City/State \_\_\_\_\_  
Kind of business \_\_\_\_\_ Employed from mo./yr. \_\_\_\_\_ to \_\_\_\_\_ mo./yr.  
Phone number \_\_\_\_\_ Title \_\_\_\_\_  
Initial compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus) Final compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus)  
Nature of work \_\_\_\_\_  
Supervisory \_\_\_\_\_ Name and title of  
Responsibility \_\_\_\_\_ immediate supervisor \_\_\_\_\_  
What do/did you like most about your job? \_\_\_\_\_  
What do/did you least enjoy? \_\_\_\_\_  
Reasons for leaving or desiring to change \_\_\_\_\_  
May we contact this company? \_\_\_\_\_
- B.** Company \_\_\_\_\_ Address \_\_\_\_\_ City/State \_\_\_\_\_  
Kind of business \_\_\_\_\_ Employed from mo./yr. \_\_\_\_\_ to \_\_\_\_\_ mo./yr.  
Phone number \_\_\_\_\_ Title \_\_\_\_\_  
Initial compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus) Final compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus)  
Nature of work \_\_\_\_\_  
Supervisory \_\_\_\_\_ Name and title of  
Responsibility \_\_\_\_\_ immediate supervisor \_\_\_\_\_  
What do/did you like most about your job? \_\_\_\_\_  
What do/did you least enjoy? \_\_\_\_\_  
Reasons for leaving or desiring to change \_\_\_\_\_  
May we contact this company? \_\_\_\_\_
- C.** Company \_\_\_\_\_ Address \_\_\_\_\_ City/State \_\_\_\_\_  
Kind of business \_\_\_\_\_ Employed from \_\_\_\_\_ to \_\_\_\_\_  
mo./yr. mo./yr.  
Phone number \_\_\_\_\_ Title \_\_\_\_\_  
Initial compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus) Final Compensation \_\_\_\_\_ (base) \_\_\_\_\_ (bonus)  
Reasons for leaving or desiring to change \_\_\_\_\_
- D.** Company \_\_\_\_\_ Location \_\_\_\_\_  
Title \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Reasons for leaving or desiring to change \_\_\_\_\_
- E.** Company \_\_\_\_\_ Location \_\_\_\_\_  
Title \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Reasons for leaving or desiring to change \_\_\_\_\_
- F.** Company \_\_\_\_\_ Location \_\_\_\_\_  
Title \_\_\_\_\_ Employment Dates \_\_\_\_\_  
Reasons for leaving or desiring to change \_\_\_\_\_

### III. EDUCATION

**A. High School**

(Circle grade completed)      High School      GED      Other  
 Name of High School \_\_\_\_\_ Location \_\_\_\_\_  
 Approximate number in graduating class \_\_\_\_\_ Rank from top \_\_\_\_\_ Final grade point average (A= \_\_\_\_\_)  
 Offices, honors/awards \_\_\_\_\_  
 Part-time and summer work \_\_\_\_\_

**B. College/Graduate School**

(Circle highest grade completed)    College 1 2 3 4 5 6 7 8

Name & Location	From	To	Major/Minor	Grade point average	Total credit hours	Degree held

What undergraduate courses did you like most? \_\_\_\_\_ Why? \_\_\_\_\_

What undergraduate courses did you like least? \_\_\_\_\_ Why? \_\_\_\_\_

Extracurricular activities, honors, and awards \_\_\_\_\_

How was your education financed? \_\_\_\_\_

Part-time and summer work \_\_\_\_\_

Subsequent courses or studies \_\_\_\_\_

***Pharmacist Applicants Only:***

License #: \_\_\_\_\_ Expiration Date \_\_\_\_\_ Prior Disciplinary Orders? Yes \_\_\_\_\_ No \_\_\_\_\_

### IV. REFERENCES

Personal References (List 3 business & 2 personal)

Name	Business or Occupation/Relationship	Phone Number	Yrs. Known

**V. AIMS**

Attach additional pages if necessary.

What are your plans for the future? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What qualifications, abilities, and strong points will help you succeed in this job?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Hobbies or interests (present) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Publications, patents, inventions, or special honors or awards \_\_\_\_\_  
\_\_\_\_\_

Recently read business publications \_\_\_\_\_  
\_\_\_\_\_

What days and hours are you available for work? \_\_\_\_\_

Are you willing to relocate? Yes \_\_\_ No \_\_\_ Any restrictions? \_\_\_\_\_  
\_\_\_\_\_

**AGREEMENT**

I certify that the foregoing statements are true and correct to the best of my knowledge and belief and hereby grant H-E-B permission to verify such information. I understand that any misstatement, false statement, omission or incomplete response on this application or at any time during the selection process, including interviews, tests, etc., may be considered as sufficient reason for rejection of my application or for dismissal if discovered after my employment. I authorize any of the persons or organizations referenced in this application to give H-E-B any and all information concerning my previous employment, education, or criminal or credit background at anytime during my tenure of employment or any other information with regard to the subjects covered by this application, and I release all such parties from all liability from any damages or claims that may result for furnishing such information to H-E-B. I further agree and understand that a criminal background check may be conducted before and/or after I am hired. I understand and agree that while a conviction will not necessarily disqualify me from employment, the existence of a criminal background or the failure to provide complete information relating to the criminal background question may result in the rejection of my application or if hired, in the separation of my employment with H-E-B. I also understand that the position for which I am applying may require a substance abuse screen. If I am employed, I agree to abide by and comply with all rules of the Company. I further understand and agree that I, like H-E-B, can terminate my employment at any time with or without cause or notice and this agreement cannot be altered or modified.

**AGREEMENT TO ARBITRATE**

H-E-B AND I HEREBY AGREE TO SUBMIT ANY CONTROVERSY OR CLAIM ARISING OUT OF OR RELATING TO MY HIRING, EMPLOYMENT, BENEFITS, AND/OR SEPARATION OF EMPLOYMENT OR ANY OCCUPATIONAL OR ON-THE-JOB INJURY/ILLNESS TO, AND RESOLVED EXCLUSIVELY BY, FINAL AND BINDING ARBITRATION UNDER THE FEDERAL ARBITRATION ACT TO BE ADMINISTERED BY THE AMERICAN ARBITRATION ASSOCIATION (AAA) OR OTHER MUTUALLY AGREED TO ARBITRATOR, PURSUANT TO THE AAA'S NATIONAL RULES FOR THE RESOLUTION OF EMPLOYMENT DISPUTES. THE STANDARD OF REVIEW TO BE APPLIED TO THE ARBITRATOR'S FINDINGS OF FACT AND CONCLUSIONS OF LAW WILL BE THE SAME AS THAT APPLIED BY AN APPELLATE COURT REVIEWING A DECISION RESULTING FROM A BENCH TRIAL.

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

Signature: \_\_\_\_\_

