



## EMPLOYMENT HISTORY

List each job held, starting with your present or last job; include any volunteer activities that may be applicable.

Employer Information	Dates of Employment	Salary	Immediate Supervisor
Employer	From	Starting	Name
City/State                  Phone	To	Ending	Phone
Job duties			
Reason for Leaving			
Employer	From	Starting	Name
City/State                  Phone	To	Ending	Phone
Job duties			
Reason for Leaving			
Employer	From	Starting	Name
City/State                  Phone	To	Ending	Phone
Job duties			
Reason for Leaving			

Have you ever been dismissed, suspended or allowed to resign in lieu of discharge?     Yes     No  
 IF YES, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### EDUCATION\*

List all education received in U.S.A. or any other country.

	Name & Location	No. of Years	Degree Received	Major Subject
High School				
College				
Graduate School				
Other				

### COMPUTER SKILLS

	Classroom or On-the-Job Training		Proficiency Level		
	Yes	No	Beginning	Intermediate	Advanced

Microsoft Word					
Excel					
Power Point					
Outlook					
Basic Computer Skills					
Other: _____					

### SPECIAL SKILLS OR TRAINING (That may qualify you for work with our company)


### BUSINESS REFERENCES

(Managers, Supervisors, Leads, Co-workers)

Name	Company	Title	Phone

\* This information will not be used in violation of any federal, state or local equal employment opportunity law.



HEALTH GROUP, INC.

395 S. Glen Ellyn Rd.

Bloomington, IL 60108

Phone: 630-545-9098

E-mail : jobs@nowfoods.com

Web Site: www.nowfoods.com

## **EQUAL OPPORTUNITY STATEMENT**

NOW Health Group, Inc. is an equal opportunity employer and does not discriminate on the basis of race, color, gender, religion, age, national or ethnic origin, or disability.

## **PRE-EMPLOYMENT STATEMENT**

I understand that as part of the normal procedure for processing my employment application, an investigative consumer report may be prepared and I have the right to make a written request to receive detailed information about the nature and scope of this investigation. I authorize the company and its agents to verify the information on this application. I authorize all persons, schools, companies and law enforcement authorities to release information concerning my background, and I hereby release them from any liability for any damage whatsoever for issuing this information.

In the event that I am hired, I understand that my employment can be terminated with or without cause, and with or without notice, at any time at the option of either the company or myself. I understand that no employee or agent of the company other than the President is authorized to offer me an employment relationship other than one which is terminable at will. I further understand that any deliberate misstatement of fact or omission from this application will result in my immediate dismissal.

If employed, I further agree to comply with all company rules, policies and procedures, including those pertaining to patent/invention matters, conflict of interest, health, safety and security, and non-smoking within the facility.

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Applicant's Signature

Date