



Neighborhood Pharmacy

140B Estate St. George
 Frederiksted VI 00840
 Phone: 340-718-6784(NPVI)
 Fax: 340-719-6784(NPVI)
 Web: www.NPVI.com

Employee #

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EMPLOYMENT APPLICATION

Neighborhood Pharmacy is an equal employment opportunity employer. Our company will provide reasonable accommodations (such as a qualified sign language or other personal assistance) with the application process upon your request consistent with applicable laws.

Personal Information

Legal First Name: _____	Are you at least 16 years old? Yes No
Legal middle Name: _____	Are you at least 18 years old? Yes No
Legal Last Name _____ Suffix: _____	Are you legally authorized for employment in the United States Yes No
Are you, or have been known by any other legal name? Yes No	If hired, will you be able to provide proof of legal eligibility to work? Yes No
If yes, please provide: _____	How did you hear we were hiring? _____
What is your preferred name? _____	
Mailing Address: _____	
City: _____ State: _____ ZIP Code: _____ Country: _____	
Phone Number (____) _____ - _____	
Second phone Number (____) _____ - _____	
Social Security Number: _____ - _____ - _____	To better communicate to or guests, what language other than English can you speak and/or write? (Store Applicants Only)
Email Address: _____	

Employment Desired

When are you available to start? ____/____/____	What do you hope to earn? \$ _____
What position(s) are you applying for? _____	What type of job are you applying for? ____ Seasonal Regular/Non –Seasonal

Educational Experience

	School Name/City/State/Zip Code	Country	Type of Degree/Major Field of Study	Status
High School				Graduated/GED Still in School Not Currently in School
Community College/ Technical or Vocational School				Graduated/GED Still in School Not Currently in School
College, Business School or other Training Facility				Graduated/GED Still in School Not Currently in School
Graduate School				Graduated/GED Still in School Not Currently in School

Employment Experience

Neighborhood Pharmacy will contact your current employer if you consent. Our Company reserves the right to contact the other employers listed without any further notification to you.

May We Contact Your Current Employer Yes No	Current or Most Recent Employer	Next Most recent Employer	Third Most Recent Employer
Employment Dates:	Start Date: End Date:	Start Date: End Date:	Start Date: End Date:
Company Name:			
Address:			
City, State, ZIP Code:			
Country:			
Phone Number:			
Position Held/Title			
Job Duties:			
Last Hourly Rate/Annual Salary			
Supervisor Name:			
Reason for Leaving:			

Neighborhood Pharmacy Employment Experience

Have you previously applied at Neighborhood Pharmacy? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you been employed Neighborhood Pharmacy before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employment Dates:	Start Date:	End Date:
	Phone Number:		
	Position Held/Title:		
	Job Duties:		
	Last Hourly Rate/Annual Salary		
	Supervisor's Name:		

Military experience

Position Held/Title:	Last Hourly Rate/Annual Salary:
Job Duties:	Supervisor's Name:

Volunteer Experience

Volunteer Dates:	Start Date:	End Date:	Country:
Organization Name:	Phone Number:		
Address:	Responsibilities:		
City/State/Zip:	Contact Name:		

Previous Conviction Information

The existence of a conviction will not atomically disqualify you as a job applicant. Do not answer "yes" if the conviction has been expunged, annulled, sealed, statutorily eradicated, pardoned, dismissed upon condition of probation, or is only a minor traffic violation.

Have you been convicted of a crime other than a minor traffic violation? Yes: No or No Record:

If yes, please explain:

Please Read Carefully

We're glad you're interested in joining our team. Our company complies with federal, state, and local laws, regarding equal employment opportunity. Qualified applicants are considered for all positions without regard to race, color, national origin, religious beliefs, sex (including pregnancy), age, disability, sexual orientation, citizenship status, military status or any other basis protected by federal, state, and/or local fair employment laws. Neighborhood Pharmacy does not discriminate against employees on any basis prohibited by law and not based on their sincerely held religious beliefs and will provide a reasonable religious accommodation to individuals who meet all essential requirements of a position and where such accommodation does not cause Neighborhood Pharmacy an undue hardship.

Teamwork requires dedication, trust, and above all, honesty. It is a commitment we ask of all our team members and potential team members. Please answer every question on this application completely and accurately without omitting any information. If you don't answer every question completely and accurately or if you make false statements or misrepresentations during the interview or during the application process, and you are hired, you could lose your job regardless of how long you have been employed.

This application is just that, an application. It is not an offer, promise or contract of employment, either or implied. All of our team members are "at will" team members, which means that team members can terminate the employment relationship at any t time, for any or no reason. Neighborhood Pharmacy reserves the right to change and/or terminate a team member's employment, compensation and benefits, with or without notice or case at any time. Neighborhood Pharmacy will not, and team members and applicants should not, interpret any verbal or written statements, policies, practices, or procedures as altering their "at will" status. "At will" status can be altered with the advance written approval from the Executive Vice President of Human Resources or his/her designate.

You understand that Neighborhood Pharmacy has a vital interest in maintain a safe free workplace and in most locations a job offer is conditional upon passing a drug test and a criminal background check.

You understand that our company may investigate the information provided on your application. You understand that Neighborhood Pharmacy may use an outside vendor to compile and process electronically the information you provide on this application during the hiring process. You release Neighborhood Pharmacy, previous employers, any vendor Neighborhood Pharmacy may use, and other persons from all claims and liabilities in connection with any investigation into information provided on your application (including the making of inquiries and the furnishing of information) or in connection with the furnishing information for the purpose of electronic compilation or processing of this information.

If you are employed by Neighborhood Pharmacy, you agree to read, understand, and comply with Neighborhood Pharmacy's policies and procedures that may change from time to time.

Applicant Signature: _____ **Date:** _____