

**Seneca Vegetable Research, Inc.**

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**APPLICATION  
FOR  
EMPLOYMENT**

PERSONAL INFORMATION

Name (Last, First, Middle): \_\_\_\_\_ Date: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

GENERAL INFORMATION

Student? Y or N \_\_\_\_\_

Date you can begin work? (must be after school is off for the summer) \_\_\_\_\_

Are you a minor (Between the ages of 14-17)? Y or N \_\_\_\_\_  
If yes, you must obtain a Work Permit.

Do you have a valid drivers license? Y or N \_\_\_\_\_

Do you have any allergies? Y or N \_\_\_\_\_ Bee Stings? Y or N \_\_\_\_\_ Pollen? Y or N \_\_\_\_\_

Do you have difficulty:  
Bending or stooping? Y or N \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_