



RENAISSANCE NUTRITION, INC.

Employment Application
An Equal Opportunity Employer

CONSULTANT/SALES APPLICATION FORM

Please print clearly and fill out completely.

PERSONAL INFORMATION

Date: _____

Name _____ SSN: _____

Current Address: _____

City: _____ State: _____ Zip: _____

▪ Permanent Address: _____

City: _____ State: _____ Zip: _____

Birth date: _____ Telephone: _____ Best time to call: _____

Alternative Telephone: _____ E-Mail: _____

Date you can start work: _____

Are you currently employed? YES NO

May we contact your current employer? YES NO

Who should we ask for: _____

Have you ever applied to Renaissance before? YES NO
If yes, when? _____

EDUCATION

Circle the number of years you have attended school:

1 2 3 4 5 6 7 8 9 10 11 12 BA/BS MA/MS PhD

High School Attended: _____

Address: _____

Did you graduate? YES NO Year: _____

Did you attend college or university? YES NO

Degree(s): _____

Did you attend a Trade School? YES NO

Degree/Certification:

SKILLS

Please indicate in which of the following you have experience or skills:

Computer use:

Limited ___ Intermediate ___ Proficient ___ Advanced ___

E-mail/Web use:

Limited ___ Intermediate ___ Proficient ___ Advanced ___

Computer Ration Program:

Limited ___ Intermediate ___ Proficient ___ Advanced ___

Indicate ration program(s) are you most familiar with:

Other software/hardware familiar with:

Training in computer program(s):

List any other special skills, activities, hobbies, experiences or other information you feel would be helpful in evaluating your qualifications (use an additional sheet if necessary). Please include professional memberships and organizations you have been involved with.

EXPERIENCE

Indicate where you have worked, starting with most current employer. Attach a current resume with this application.

Business Name: _____

From: _____ To _____

Address: _____

Telephone: _____ May we contact them? YES NO

Job title: _____ Supervisor: _____

Starting Salary: _____ Ending Salary: _____

Description of duties:

Reason for leaving:

Business Name: _____

From: _____ To _____

Address: _____

Telephone: _____ May we contact them? YES NO

Job title: _____ Supervisor: _____

Starting Salary: _____ Ending Salary: _____

Description of duties:

Reason for leaving:

Business Name: _____

From: _____ To _____

Address: _____

Telephone: _____ May we contact them? YES NO

Job title: _____ Supervisor: _____

Starting Salary: _____ Ending Salary: _____

Description of duties:

Reason for leaving:

For additional space please add additional sheet(s) as needed.

REFERENCES

Please do not use any family member.

Name:

Relationship: _____ Years known: _____

Address:

Telephone: _____ E-mail: _____

Name:

Relationship: _____ Years known: _____

Address:

Telephone: _____ E-mail: _____

Name:

Relationship: _____ Years known: _____

Address:

Telephone: _____ E-mail: _____

STATEMENT OF VERIFICATION

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

Signature: _____ Date:

Submit a current copy of your Resume along with this completed application to:

RENAISSANCE NUTRITION, INC.

P.O. Box 229
481 Frederick Rd.
Roaring Spring, PA 16673

1-800-346-3649

rennut@rennut.com