

APPLICATION FOR EMPLOYMENT IN SALES AND ADVERTISING DEPARTMENT

KELLOGG SALES COMPANY

BATTLE CREEK, MICH.

LONDON, ENGLAND LONDON, ONTARIO

This form must be filled out in applicant's own hand writing. All information given will be treated as confidential.

Name in full Jack Ziskind Date 3/3 1938 Soc. Sec. No. 192-05-5648

Permanent home address 217 S. Evaline St. Pittsburgh, Pennsylvania
Street and Number City and State

How long have you lived there? 18 years Telephone No. Wiland 5314

Have you ever been employed by this Company? no. In what capacity? -

DATE OF BIRTH			AGE	
Month	Day	Year	Years	Months
<u>May</u>	<u>3</u>	<u>1911</u>	<u>26</u>	<u>10</u>

PLACE OF BIRTH

CITY	STATE
<u>Pittsburgh</u>	<u>Pennsylvania</u>

LINEAGE

Hebrew

English, Irish, Hebrew, German, Etc.

Are You a Citizen of the United States? yes

NATIONALITY OF PARENTS

MOTHER	FATHER
<u>Hebrew</u>	<u>Hebrew</u>

BIRTHPLACE OF PARENTS

MOTHER	FATHER
<u>United States</u>	<u>United States</u>

Single	Married	Widower	Separated	Divorced
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

How Long Married? - How Long Separated? -

Number of Children	Their Ages	Number of Other Dependents
<u>-</u>	<u>-</u>	<u>-</u>

RELATIONSHIP OF OTHER DEPENDENTS

2 Brothers + sister

WHO IS YOUR NEAREST RELATIVE? NAME AND ADDRESS

David Ziskind - 217 S. Evaline St.

RELATIONSHIP OF YOUR NEAREST RELATIVE?

Father

IF SINGLE, ARE YOU ENGAGED TO BE MARRIED?

no.

WHEN?

-

DO YOU LIVE WITH PARENTS?	BOARD, RENT OR OWN OWN HOME?
<u>yes.</u>	<u>Own.</u>

AMOUNT OF INSURANCE CARRIED?

Life	Accident	Health
<u>\$1500</u>	<u>-</u>	<u>-</u>

DO YOU OWN A CAR? MAKE

yes. Plymouth

HEIGHT	WEIGHT	PHYSICAL DEFECTS, IF ANY
<u>5' 11"</u>	<u>170</u>	<u>none.</u>

HOW MUCH TIME HAVE YOU LOST THROUGH ILLNESS DURING THE PAST TWO YEARS?

none.

ARE YOU WILLING TO TAKE PHYSICAL EXAMINATION?

yes.

HAVE YOU INCOME BESIDES WHAT YOU WILL RECEIVE FROM US?

no.

HAVE YOU EVER BEEN BONDED? yes.

WHAT COMPANY Gulf Refining Co - Kroger Grocery Co.

HAS BOND EVER BEEN REFUSED? no.

IF SO, WHY? ✓✓

NAME EMPLOYEES OF THIS COMPANY WITH WHOM YOU ARE ACQUAINTED

none.

ARE YOU AT PRESENT EMPLOYED?

yes. - Kroger Grocery + Bowling Co.

DOES LAST EMPLOYER CLAIM ANY UNPAID BALANCE AGAINST YOU?

no.

WHAT TERRITORY DID YOU COVER? Barnesville, Ohio - Tri-state area - Optimities Clearfield, Oil City

IN WHAT TERRITORIES HAVE YOU HAD MORE THAN SIX MONTHS' EXPERIENCE?

Tri-state area - W.Va - Charleston - Wheeling - Ohio - West to Barnesville - Penna. - Mountaintown to Kove.

WHAT CLASSES OF TRADE HAVE YOU SOLD?

my experience entails direct retail merchandising to the consumer for the past seven years through the medium of chain stores.

EMPLOYMENT

List Past Positions in Order Worked, With Your Present Connection Last EMPLOYER Give Full Name of Company or Firm	CITY AND STATE	KIND OF BUSINESS	TIME EMPLOYED				
			From Mo.	Yr.	TO Mo.	Yr.	
1 Gulf Refining Co.	Pittsburgh, Pa.	Oil & Gas.	Sept.	1930	Sept.	1931	
2 Star Markets.	102 24th St. "	Chain Grocery	June	1932	Sept.	1933	
3 Schopf's Markets	4901 Broad St. "	Independent Grocer.	Sept.	1933	May	1935	
4 Kroger Gro. & Baking Co.	21st & A.V.R.R. Pgh.	Chain Grocery	May	1935	Still Employed.		
5							
6							
7							
8							

(Continued from Above)

EMPLOYMENT REFERENCES

GIVE NAME OF EACH PERSON UNDER WHOM YOU WORKED	HIS PRESENT FIRM, STREET, CITY AND STATE ADDRESS	HIS PRESENT POSITION OR TITLE
1 J. H. Hunkler	Gulf Ref. Co. - Gross St. & A.V.R.R.	District Agent.
2 Sam Deaton	Star Markets - 102 - 24th St.	Owner.
3 Jos. Schopf	Schopf's Markets - 4901 Broad St.	Owner
4 David Heron	Kroger Gro. Co. - 21st & A.V.R.R.	Head of Auditing Dept.
5		
6		
7		
8		

WHY DO YOU WISH TO LEAVE YOUR PRESENT EMPLOYER?

See reasons outlined in detail on back page.

MAY WE REFER TO YOUR PRESENT EMPLOYER?

Yes.

BUSINESS REFERENCES, OTHER THAN FORMER EMPLOYERS

NAME	ADDRESS	POSITION OR TITLE	STATE WHETHER RELATIVE
Larry H. Gordon	359 S. Atlantic Ave.	Dep't. Store Buyer	no.
Wm. T. Maher, Jr.	121 S. Euclid St. Pgh.	Office Manager for State Employment Board	no.
Harry A. Smith, Jr.	131 Lowry Ave. Emsworth, Pa.	Kentrol Co.	no.
R.S. Alexander, Jr.	7320 Hamilton Ave. Pgh.	Supervisor - Kroger Co.	no.
E.J. Rognow	1309 Arlington Ave.	Salesman	no.

RECORD

POSITION YOU HELD	Plan of Compensation: Salary, Commission, or Salary and Comm.	Average Amount of Sales on Annual Basis	WHY DID YOU LEAVE?
Service Station Mgr.	Salary \$1175	-	Resigned to attend University of Pgh.
Chain Store Manager	Salary \$1750	-	Resigned to accept better position.
Store Manager	Salary \$1340	-	Resigned to accept position with Kroger.
Manager - Auditor	Salary \$1200	-	Desire to enter sales and advertising field where I feel my qualifications are at a greater advantage.

IF OFFERED EMPLOYMENT, HOW SOON CAN YOU REPORT FOR WORK?

Within weeks.

COMPENSATION DESIRED \$ 7500 on Commission basis.

EDUCATION

SCHOOL OR COLLEGE	WHERE LOCATED	ATTENDED		COURSE OF STUDY	State Whether Graduated or Not
		From Year	To Year		
Grade School	Friendship	1918	1926	Elementary	yes.
High School	Peabody	1926	1930	Academic	yes.
College or University	University of Pittsburgh	1930	1932	Bus. Admin.	no.
Other Schools Attended					
Correspondence Courses					

Are You Studying Now?

yes.

What and Where?

Advertising Methods & Principles.

WHAT ARE YOUR FAVORITE RECREATIONS, SPORTS OR HOBBIES?

Reading Economics - Biography

PLACE SMALL PICTURE OF YOURSELF BELOW

IN THE SPACE BELOW, BRIEFLY SET FORTH WHY YOU DESIRE A CONNECTION WITH THIS COMPANY AND WHY YOU THINK YOU WOULD MAKE A SUCCESSFUL REPRESENTATIVE:

Lined area for writing the applicant's response to the question above.

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SCHOOL OR COLLEGE	WHERE LOCATED	COURSE OF STUDY	ATTENDED

IT IS UNDERSTOOD AND AGREED THAT ANY AGREEMENT ENTERED INTO BETWEEN THIS COMPANY AND THE APPLICANT IS PREDICATED UPON THE TRUTHFULNESS OF THE STATEMENTS HEREIN CONTAINED.

Signature of Applicant

The Space Below to Be Filled Out by a Representative of the Company.

RECOMMENDED FOR _____ HEADQUARTERS TOWN _____

AT A SALARY OF \$ _____ PER _____ DATE EMPLOYED _____ { Permanent / Temporary

MEDICAL APPLICATION SUPPLIED _____ HOTEL ALLOWANCE _____

EMPLOYMENT APPROVED BY _____ District Sales Manager.

EMPLOYMENT APPROVED BY _____ General Sales Manager.

REMARKS: _____