## **EMPLOYMENT APPLICATION**

We reserve the right to make a thorough inquiry into your background. Such an inquiry is not a reflection of you, the applicant, but an attempt to safeguard this store, it's employees and our customers. If you wish, please feel free to discuss any matter with the personnel representative before completing this application.

(Please print clearly and answer all questions.)

Name:			Phone:	
First	Middle	Last		
Address:		<u> </u>		
		City	State	Zip
How many years at this address?	Email Ad	ddress:		
MPLOYMENT INFORMATION				
Desired Position:		Des	ired Rate of Pay:	
Do you have any special skills related to desired position:				
Hours Desired Full-Time	Part-Time			
If Part-Time,				
-	Nights 5-10	Saturdays S	undays 🗌 Holidays	Afternoons
List locations you would prefer to v	work at in order	of preference:		<sup></sup> 2-8pm
1				
2				
3				
Available Start Date:		Do you have transportation:		
Are you between the ages of 21 and	l 70:		_If not, Please state age	:
Have you previously applied?		How did you hea	r about us:	
DUCATIONALBACKGROUND	)	MILITARY SE	RVICE	
High School		Have you ever served in the Military?		?
Address		Branch		
Highest Grade Completed		Dates of Duty		
College/Other				
Address				
Completed?Yea				
Highest Grade Completed				

## WORK HISTORY

List in order beginning with your most recent employer. Please account for all periods unemployed.

1 Name & Address of Company and Type of Business	Employment Information			
	Employed From	То	Full-TimePart-Time	
	Title Supervisor	Reas	on for ving	
Tel #	Duties			

Were you unemployed between position 1 & 2?\_\_\_\_\_\_If so, why?\_\_\_\_\_\_

<b>2</b> Name & Address of Company and Type of Business	Employment Information			
	Employed From	То	_ Full-Time Part-Time	
	Title Supervisor	Reason for		
Tel #	Duties			

Were you unemployed between position 2 & 3?\_\_\_\_\_\_If so, why?\_\_\_\_\_\_

<b>3</b> Name & Address of Company and Type of Business	Employment Information			
	Employed From	То	Full-TimePart-Time	
	Title			
	Supervisor	Reas	on for ving	
Tel #	Duties			

May we contact employers above?\_\_\_\_\_\_ If not, indicate by # which you do not wish us to contact \_\_\_\_\_

Please list any information relative to change of name, assumed name, etc. that is necessary to check your work record

I certify that answers given herein are true and complete to the best of my knowledge. I authorize you to make inquiries of my past employment as specified above and other related matters as may be necessary in arriving at an employment decision. In the event of my employment, I understand that false or misleading information may result in discharge. I understand that this employment application and any other company documents are not contracts of employment, and any individual who is hired may voluntarily leave employment on proper notice, or may be terminated by the employer for any reason, at any time, without previous notice regardless of date of payment of my wages and salary. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee. I also understand that changes may be made in regards to wages, benefits and conditions at any time.

Signature			Date			
	OFFICIAL USE (	ONLY - DO NOT WRITE B	ELOW THIS LIN	E		
Date Interviewed	viewedByDate Em		ed Start Date			
Location	Job Classificat	ion	Wage Rate		F/T	P/T
Position	Reference R	esults				
	1					
	2					
	3					