



RETAIL APPLICATION FOR EMPLOYMENT

WWW

We assure an equal opportunity to all applicants without regard to race, color, religion, sex, age, national origin, disability, arrest record or marital status, and affirmatively seek to advance the principals of equal opportunity employment.

Please Print Plainly

Date: ____/____/____

NAME _____ PHONE # _____
Last First M.I. CELL # _____

PRESENT ADDRESS _____
Street City State

ARE YOU AT LEAST 18 YEARS OLD? YES _____ IF NOT, HOW OLD? _____ SOCIAL SECURITY # _____

POSITION(S) APPLIED FOR: _____ Rate of Pay Expected: _____

Would you work: Full Time _____ Part Time _____

Hours you <u>can</u> work:	From	To	From	To
<i>Monday</i>	_____	_____	<i>Friday</i>	_____
<i>Tuesday</i>	_____	_____	<i>Saturday</i>	_____
(Required) <i>Wednesday</i>	_____	_____	<i>Sunday</i>	_____
<i>Thursday</i>	_____	_____		

Do you know of any restrictions, personal or otherwise, which could restrict the hours you can work? Yes _____ No _____

If yes, please explain: _____

Were you previously employed by this or an affiliated store? _____ If yes, when or where: _____

List any friends or relatives working for us: _____
Name How Related

Name How Related

Are you prevented from lawfully beginning employment in this country because of visa or immigration status? Yes _____ No _____

Have you ever been convicted of a crime other than a traffic violation? Yes _____ No _____

If yes, state nature of crime: _____

Summarize special skills and qualifications acquired from employment, education, or other experience: _____

EDUCATION

School	Name & Location	Highest Grade Completed	Degree or Diploma	Major
High School		9, 10, 11, 12		
College		1, 2, 3, 4		
Other				

BEGINNING WITH YOUR MOST RECENT POSITION, LIST ALL PRESENT AND PAST EMPLOYMENT

1. Company Name	Employed From _____ To _____		Name of Supervisor:
Address	Rate of Pay		Your Title:
			Describe Major Functions of Your Job:
Phone	Type of Business	Reason for Leaving	
2. Company Name	Employed From _____ To _____		Name of Supervisor:
Address	Rate of Pay		Your Title:
			Describe Major Functions of Your Job:
Phone	Type of Business	Reason for Leaving	
3. Company Name	Employed From _____ To _____		Name of Supervisor:
Address	Rate of Pay		Your Title:
			Describe Major Functions of Your Job:
Phone	Type of Business	Reason for Leaving	
4. Company Name	Employed From _____ To _____		Name of Supervisor:
Address	Rate of Pay		Your Title:
			Describe Major Functions of Your Job:
Phone	Type of Business	Reason for Leaving	

May we contact employers listed above? _____ If not, indicate by number which one(s) you do not wish us to contact. _____

Have you ever been discharged or asked to resign by any former employer? Yes _____ No _____

If yes, please explain: _____

UNEMPLOYMENT HISTORY: Please list dates and explain any period of unemployment: _____

CONDITIONS: I attest that all information in this application is true and authorize the company to investigate all statements concerning my character, reputation and work history. I understand that any offer of employment may be contingent on my passing a drug screen and/or a post-offer medical examination. It is understood that any misrepresentation by me of facts required on this application will be sufficient cause for non-employment or immediate dismissal from the company should I have been employed. I agree to conform to the policies and rules of the company, and understand that my employment and compensation are at the will of the company. All applicants will be required to furnish proof of identity and legal work authorization prior to being hired.

Date _____ Signature _____

This application of employment is not intended to be a contract of employment.