



HOURS YOU CAN WORK:

FROM _____ TO _____

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Sunday _____

APPLICATION FOR EMPLOYMENT (Please Print)

POSITION DESIRED:

1 _____

2 _____

3 _____

FULL TIME _____ PART TIME _____ EITHER _____

Do you have means of private transportation should you be considered for employment in an area lacking in public transportation?

Yes _____ No _____

Do you know of any restrictions, personal or otherwise, which would restrict the hours you can work?

Yes _____ No _____

Date you can begin work: _____

Salary Desired: _____ per hour _____ per week _____ annual

PERSONAL IDENTIFICATION:

Name: _____

Present Address, city, state _____ Zip Code _____ How Long? _____

Permanent Address _____ Zip Code _____ How Long? _____

Phone No. _____ Emergency Phone No. _____

Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration status (Proof of citizenship or immigration status will be required upon employment)

Yes _____ No _____

Are you 18 or over? Yes _____ No _____ If not, how old? _____ Do you have working papers? Yes _____ No _____

EDUCATION:	NAME OF SCHOOL CITY AND STATE	MAJOR COURSE OR SUBJECT	Highest Grade Completed (Circle)	Did you Graduate?
ELEMENTARY			5 6 7 8	
HIGH SCHOOL			1 2 3 4	
COLLEGE OR UNIVERSITY			1 2 3 4	
GRADUATE/PROFESSIONAL SCHOOL			1 2 3 4	

PREVIOUS EMPLOYMENT RECORD:

(starting with your present or last job, list each job held)

Employer _____ Type of Business _____

Address _____ Phone No. _____

Starting Date _____ Starting Duties: _____ Starting earnings _____

Leaving Date _____ Leaving Duties: _____ Leaving earnings _____

Reason for termination: _____

Last immediate supervisor's name and title: _____

Employer _____ Type of Business _____

Address _____ Phone No. _____

Starting Date _____ Starting Duties: _____ Starting earnings _____

Leaving Date _____ Leaving Duties: _____ Leaving earnings _____

Reason for termination: _____

Last immediate supervisor's name and title: _____

Employer _____ Type of Business _____

Address _____ Phone No. _____

Starting Date _____ Starting Duties: _____ Starting earnings _____

Leaving Date _____ Leaving Duties: _____ Leaving earnings _____

Reason for termination: _____

Last immediate supervisor's name and title: _____

PERSONAL REFERENCES:

NAME (Not relatives or previous employers)	ADDRESS	OCCUPATION	PHONE

MISCELLANEOUS:

Have you ever filed an application with our company? Yes _____ No _____

If yes, approximate dates of previous applications: _____

Have you ever been employed by our company in the past? Yes _____ No _____

If yes, approximate dates and locations: _____

What special skills or qualifications do you possess? _____

What office machines can you operate? _____

Who referred you to us? _____

Are you working more than one job? Yes _____ No _____

If yes, explain _____

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

If yes, state nature of crime: _____

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

If yes, explain in detail: _____

No applicant will be excluded from consideration for employment due to prior arrests.

A conviction is not an absolute bar to employment. Your answer is looked upon as only one of the factors considered in the employment decision and is evaluated in terms of the nature, severity and date of the offense.

APPLICANT'S AGREEMENT:

I hereby represent that each answer to a question herein and all other information otherwise furnished is true and correct. I further represent that such answers and information constitute a full and complete disclosure of my knowledge with respect to the question of subject to which the answer or information relates. I understand that any incorrect, incomplete or false statements or information furnished by me will subject me to discharge at any time. I hereby authorize my former employers to give any information regarding my employment with them and in addition to furnish any other information that may have concerning me.

I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages, be terminated at any time without previous notice, such action is not inconsistent with any collective bargaining agreement which may govern the "wages" and "conditions of payment" of the position in which I am employed. I understand the Company reserves the right to unilaterally change or modify "wages" and "conditions of employment" at any time without previous notice, provided such are not subject to collective bargaining.

In compliance with the Fair Credit Reporting Act (Public Law 91-508), you are notified that in connection with and in order to better evaluate this application for employment, a report may be obtained which will provide applicable information concerning character, general reputation, personal characteristics and mode of living. You have the right to make a written request within a reasonable period of time for complete and accurate disclosure of the nature and scope of the report requested.

Signature of Applicant

Date

*****FOR OFFICE USE ONLY*****

Location Manager must complete this section and forward to payroll department along with POST-EMPLOYMENT INFORMATION FORM

Location # _____ Location Name _____

Starting Date _____ Starting Rate _____

Full Time _____ Part Time _____

Position _____

Department Name _____ Department # _____

High school Student Yes _____ No _____

Under 18 Years of age: Yes _____ No _____

Employees under 18 years of age must have a Employment Certificate (working papers) on file at the store.
Certificate # _____ Date of Issuance _____
Obtained by: _____

Location Manager's Signature _____

Date _____

ALL NOTATIONS ON THE APPLICATION FOR EMPLOYMENT AND ANY DOCUMENTS CONTAINED IN THE PERSONNEL FILE AS THE POST-EMPLOYMENT QUESTIONNAIRE, EVALUATION FORMS AND OTHER ARE FOR RECORD KEEPING PURPOSES AND SHOULD NOT BE CONSTRUED AS A CONTRACT OF EMPLOYMENT.