

EMPLOYMENT APPLICATION

	Today's Date				
First Name	M.I.	Las	t Name	Preferre	ed Name/Nickname
Street Address	Apt.#		City	State	Zip Code
Home Phone Number	Alterna	te/Work	 Number	En	nail Address
PLEASE PLACE A CHECK BY	YOUR RESPO	NSE OR F	PROVIDE THE AP	PROPRIAT	E INFORMATION
Are you interested in:	☐ Ful	ll-time	Part-time	☐ Tem	porary
What schedule do you pref	er?	ekdays	Weekends	Morr	nings 🗌 Evenings
How did you hear about the	position?	Classifie	ed Ad Radio	Internet	
Desired pay: Hourly Pay S	\$	Annual	Pay \$	\$ Desir	Name
Are you able to lift up to 50lbs?					
Are you able to go up and d	own a ladder	? 🗌 Yes	□No		
Position desired:				tart work'	2
Position desired.		wileira	ile you able to s	tart work	
In what local area do you prefer to work?					
PLEASE CHECK YES OR NO T	O THE FOLLO	WING:			
Are you authorized to work in the United States?					
Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Zinnia's Gift Boutique will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.					
Are you under 18 years of ag	e?			Yes	☐ No
If yes, can you furnish a wo	rk permit?			Yes	☐ No
Are you capable of performing the essential functions of the job Yes No for which you are applying with or without reasonable accommodation?					

Zinnia's Gift Boutique is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age or military or veteran status in accordance with federal law. In addition, Zinnia's Gift Boutique complies with applicable state and local laws governing nondiscrimination in employment in every jurisdiction in which it maintains facilities. Zinnia's Gift Boutique also provides reasonable accommodations to qualified individuals with disabilities in accordance with applicable laws.



PLEASE LIST YOUR WORK EXPERIENCE BELOW:

Street Address		City	State _	Zip Code
			Supervisor's Title	
			•	
Your Job Title			Starting Pay \$	_ Final Pay \$
Description of Work _				
Start Date	Leave Date _		Reason For Leaving	
NAME OF PAST EMPLOY	ER:			
Street Address		City	State _	Zip Code
Supervisor's Name			Supervisor's Title	
Phone		E-mail _		
Your Job Title			Starting Pay \$	_ Final Pay <u>\$</u>
Description of Work _				
Start Date	Leave Date _		Reason For Leaving	
NAME OF PAST EMPLOY	ER:			
Street Address		City	State _	Zip Code
			Supervisor's Title	
Phone		E-mail _		
Your Job Title			Starting Pay \$	_ Final Pay \$
Description of Work _				
<u>-</u>				



EDUCATION

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE/DIPLOMA
High School or Prep			
College			
College or Graduate			
Other			
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PROFESSIONAL DESIGNATIONS

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Designation	Organization Granting Designation	Date Completed
Designation	Organization Granting Designation	Date Completed

PROFESSIONAL LICENSES

Type of License	State Granting License	License Number
Type of License	State Granting License	License Number

REFERENCES (please list three references)

NAME	RELATIONSHIP	COMPANY	PHONE/E-MAIL



PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References:</u> I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED	DATE

For California Applicants Only (Optional)

I am providing my contact information to the Company for limited purposes only and consider such information to be private. I understand that from time to time individuals file class action lawsuits against companies and that the mere filing of a lawsuit does not mean that the claims in the lawsuit have merit. I also understand that it is possible that individuals or their attorneys may ask that the Company provide them with my contact information as part of a class action lawsuit. I do not consent to the Company providing my contact information to any individual or attorney in any such lawsuit that may be filed, unless I later give my express written consent, or unless the Company is required to do so by law or the Company determines that I am a witness to that lawsuit.

or armoss the company is re	equired to do so by law o	the company determines t	riat rain a without to that lawsan
Signature of Applicant		Dat	te