



APPLICATION FOR EMPLOYMENT

INSTRUCTIONS:

Complete all of the necessary information. This application will be k sign and date this application.

Please print neatly!

Name_____

Area Code () Phone_____

Address_____

City/ State/ Zip_____

Position applied for: _____ Pay expected \$_____

Special Training or skills: (retail experience, gift shop experience, computer skills: WORD, EXCEL, please be specific) that would benefit you in the job for which you are applying:

Would you accept full time work? YES__ NO__ Part Time work? Yes__ NO__

On what date would you be available for work? _____

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes____ No____

Times Available: Monday_____

Tuesday_____

Wednesday_____

Thursday_____

Friday_____

Saturday_____

Sunday_____

Are you currently employed? Yes____ No____

May we contact your employer? Yes____ No____

Company_____ Phone_____

Address_____

Contact Name_____

Position_____Reason for Leaving_____

Last Wage_____ Employed from_____ to_____

Previous employer address.

May we contact your previous employer? Yes_____ No_____

Company_____ Phone_____

Address_____

Contact Name_____

Position_____Reason for Leaving_____

Last Wage_____ Employed from_____ to_____

Please provide 1 personal reference:

Name_____

Address_____

Town, State,Zip_____

Phone Number_____Relationship_____

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes___

No___

Have you ever been convicted of a felony within the last 7 years? Yes___ No___ Conviction will not necessarily

disqualify you from employment.

Are you able to perform the duties of the position that you have applied for in a safe and responsible manner? (i.e Allergy to fragrances, unable to lift, unable to bend when restocking/ creating displays..) Yes___ No___

An inability to perform certain duties will not necessarily disqualify you from employment.

I certify that the answers given here are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of "at will" nature, which means that employee may resign at any time and the employer may discharge at any time with or without cause. It is further understood that this "at will" employment relationship may not be

changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all the rules and regulations of the employer.

Applicants Signature _____

Date _____