

EMPLOYMENT APPLICATION

Date of Application:

PERSONAL INFORMATION

| First Name: | M.I.: | Last Name: | D.O.B: | / | / | / |
|-------------|--------|-------------|--------|----|----|------|
| Address: | City: | | | MM | DD | YEAR |
| State: | Zip: | Home Phone: | | | | |
| Cell Phone: | Email: | | | | | |

LOCATION APPLYING

□ Milwaukee

AVAILABILTIY

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-------|--------|---------|-----------|----------|--------|----------|--------|
| Start | | | | | | | |
| End | | | | | | | |

Degree: _

EDUCATION

High School: ____

Cedarburg

Graduation Date:

College: _

___ Graduation Date: ____

FORMER EMPLOYMENT

| Company: | Postion: | Dates Employed: |
|--------------------|-------------------|-----------------|
| Address: | City, State, Zip: | |
| Supervisor's Name: | Phone: | Email: |
| | | |
| Company: | Postion: | Dates Employed: |
| Address: | City, State, Zip: | |
| Supervisor's Name: | Phone: | Email: |

REFERENCES

Name: ____ Name: ____
 Phone:
 Relation:

 Phone:
 Relation:

ADDITIONAL INFORMATION

Why would you like to work at Access Boutique and how will you help customers:

Describe your past customer service experiences that you feel qualify you to work at Access Boutique:

"I certify that the facts contained in this application are true and complete to the best of my knowledge, and understand that falsification of these statements is grounds for dismissal. I authorize Access Boutique to confirm all statements made in this application and to contact previous employers and personal references"

| Applicant | Signature |
|-----------|-----------|
|-----------|-----------|

Date: _

Please attach your resume to this form and return to your nearest Access Boutique location:

THIRD WARD MILWAUKEE · 159 N. Broadway · 414-273-4534 | HISTORIC CEDARBURG · W63 N672 Washington Ave. · 262-376-4534