

CONFIDENTIAL APPLICATION FOR EMPLOYMENT



In order that your application may be properly evaluated, it is essential that all of the following questions be answered carefully and completely. Please feel free to use a resume to supplement this application.

How did you learn of this position? _____

Date _____

PERSONAL DATA <i>(Please Print)</i>				
Name (Last, First)		Middle Name		Phone Number
Present Address (Street, City, State, and Zip Code)	When could you start employment?	Minimum hourly salary expected?	Has any relative ever been employed by us?	Have you ever been employed by us before? If yes, in what position?
Do you have the legal right to live and work in the U.S.?	Give Visa number and work permit number, if applicable	Have you ever been convicted of a felony?	Have you been convicted of a misdemeanor in the last 3 years?	List all convictions for breaking the law that you received over your lifetime (include all major and felony convictions and only misdemeanor convictions during the past 3 years).
DATE:	DATE:		DATE:	
VIOLATION:	VIOLATION:		VIOLATION:	
COURT LOCATION:	COURT LOCATION:		COURT LOCATION:	

MILITARY RECORD				
Service Branch	Date Entered	Date Discharged	Initial Rank	Final Rank
Are you a member of the active reserve? If yes, what is your obligation?	Briefly describe your military duties	Any special commendation or recognition?	Do you have an honorable discharge?	If your discharge was other than honorable, please explain type and reason in space provided. Discharges other than honorable are not necessarily a bar to employment; however, deception as to the exact nature of discharge will result in denial of employment.
Type of Discharge		Reason		

EDUCATIONAL BACKGROUND				
Type of School	Name and Location of School	Circle Last Year Completed	Major Area of Study	Degree(s) Obtained
High or Preparatory		1, 2, 3, 4		
College		1, 2, 3, 4, 5, 6		
Other				
Typing Speed		Office Machines Operated		
Please list any additional special skills, technical or professional knowledge, use of machines or equipment you may have, including the ability to write and /or speak any foreign languages that would support your application.		List any licenses, certificates, publications, or professional achievements that would support your application.		

WORK EXPERIENCE

COMPANY NAME AND ADDRESS	EMPLOYMENT DATE	POSITIONS HELD AND DESCRIPTION OF DUTIES	BASE PAY	REASON FOR LEAVING
Employer	Date Held		Starting	
Street Address	Date Separated		Ending	
City & State	Phone #		Name & Title of Immediate Supervisor	
Employer	Date Held		Starting	
Street Address	Date Separated		Ending	
City & State	Phone #		Name & Title of Immediate Supervisor	
Employer	Date Held		Starting	
Street Address	Date Separated		Ending	
City & State	Phone #		Name & Title of Immediate Supervisor	
Employer	Date Held		Starting	
Street Address	Date Separated		Ending	
City & State	Phone #		Name & Title of Immediate Supervisor	
Employer	Date Held		Starting	
Street Address	Date Separated		Ending	
City & State	Phone #		Name & Title of Immediate Supervisor	

DRIVING RECORD (Only applicable if driving on job)

Do you have a valid driver's license?	How long have you been a licensed driver?	Driver's License #	Issuing State	Expiration Date
Any restrictions on driving listed on drivers license?	Has your auto insurance ever been canceled or has any company declined to insure you?	If yes, why?		

Applicants should be aware that employees may be required to work in excess of forty hours per week, and that employees may be required to work on a scheduled day off. All overtime work will be paid as required by law. Failure to work assigned overtime may result in discipline up to and including discharge. All employees must be able to work all days and all hours within the hours of operation, which may differ from store to store. If there are any limits on your availability to work assignments identify below. If this space is left blank, it means you are willing to accept work on any shift during any hours of operation.

"I can work only between the hours of _____ A.M./PM. and A.M./PM. I am not available for work on the following days of the week _____."

READ CAREFULLY BEFORE SIGNING

I CERTIFY THAT THE INFORMATION I HAVE PROVIDED TO THE FOREGOING QUESTIONS IS TRUE AND CORRECT, AND THAT NO ATTEMPT HAS BEEN MADE TO CONCEAL PERTINENT INFORMATION. I AUTHORIZE MY FORMER EMPLOYERS, SCHOOLS AND PERSONAL REFERENCES TO PROVIDE ANY INFORMATION THEY MAY HAVE REGARDING ME, WHETHER OR NOT IT IS ON THEIR RECORDS. I HEREBY RELEASE THEM AND THEIR COMPANY FROM ALL LIABILITY FOR DIVULGING SAME. I UNDERSTAND THAT ALL STATEMENTS MADE ARE OPEN TO INVESTIGATION BY THIS COMPANY, AND THAT IF ANY INFORMATION GIVEN BY ME IN THIS APPLICATION IS FOUND TO BE FALSE OR MISLEADING, I WILL BE SUBJECT TO DISMISSAL AT ANY TIME DURING THE PERIOD OF MY EMPLOYMENT, AND I AGREE TO HOLD THIS COMPANY AND PERSONS NAMED HEREIN BLAMELESS IN THAT EVENT. IF EMPLOYMENT IS OBTAINED UNDER THIS APPLICATION I WILL COMPLY WITH ALL RULES AND REGULATIONS OF THE COMPANY. I AGREE TO BE RESPONSIBLE FOR COMPANY PROPERTY AND EQUIPMENT ISSUED ME BY THE COMPANY UNTIL RETURNED. I AGREE TO SUBMIT A PHYSICAL EXAMINATION IF REQUIRED BY THE COMPANY. FURTHER, I HEREBY UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS AT WILL, THAT NOTHING IN THIS APPLICATION OR IN ANY OTHER COMPANY DOCUMENT SHALL BE DEEMED TO CREATE ANY CONTRACT OF EMPLOYMENT BETWEEN ME AND THE COMPANY, AND THAT MY EMPLOYMENT CAN BE TERMINATED AT ANY TIME BY MYSELF OR THE COMPANY WITH OR WITHOUT NOTICE AND WITH OR WITHOUT CAUSE. I UNDERSTAND AND AGREE THAT ANY STATEMENTS TO THE CONTRARY, WHETHER ORAL OR WRITTEN, ARE EXPRESSLY DISAVOWED AND ARE NOT TO BE RELIED UPON BY ME.

APPLICANT'S SIGNATURE

DATE

INTERVIEWED BY

DATE

REFERENCES CHECKED

HIRED

START DATE

SALARY