

## Clothing . Shoes . Accessories

This application will remain current for a period of 30 days

Please complete this application in your own handwriting, and answer or acknowledge every question

## EMPLOYMENT APPLICATION

An Equal Opportunity Employer –

"Prospective employees will receive consideration without discrimination because of race, color, creed, sex, marital status, age, national origin or ancestry, physical or mental disability, medical condition, sexual orientation, or any other consideration made unlawful by federal, state or local laws.

"We are a drug free workplace"

| or ancestry, pnysical  | or mental a        | isability, m  | nedical condition, sexual orier<br>We are a d"   |  |   |               | sideration ma       | ade uniav | vtui by teae | erai, st  | ate or local laws        | <b>;</b> .‴ |
|--|--------------------|---|--|--|---|---------------|---------------------|-----------|--------------|---|--------------------------|-------------|
|  |                    |   | PERSONAL   |  | VFOR  |               | ION                 |           |              |   |                          |             |
| Last Name  |                    |   | First Name   |  | Middle Name   |               | Phone Number (Cell) |           | Р            | Phone Number/E-Mail Address   |                          |             |
| Present Street Address   |                    |   | City   |  |   |               | State Zip Code      |           | Code         | How Long?   |                          |             |
| Previous Street Address  |                    |   | City   |  | State Zip Code  |               |                     |           |              |   | How Long?                |             |
| Are you at least 16 years old?  Yes No  If you are under 18, you will be required to obtain a work permit emm  |                    | employ Proof of immig   | you legally eligible for byment in this country?  Yes No fof U.S. citizenship or gration status will be red upon employment. |  | Have you ever been convicted of a felony or misdemeanor?  (A conviction may be relevant if job related, but not necessarily bar you from employment.)  Yes  No If yes, please explain:  (CA Applicants: Excluding marijuana convictions older than two years.)  Have you ever been terminated or asked to resign from any job?  Yes  No If yes, please explain: |               |                     |           |              |   |                          |             |
| JOB INTEREST & AVAILABILITY  |                    |   |  |  |   |               |                     |           |              |   |                          |             |
| Position Applying For: Store Management Sales Other Corporate Distribution Center Based on your under accommodation? If you will need accommodation? | ☐ With<br>mmodatio | d:<br>Fime<br>Time<br>sonal<br>nship<br>of the di<br>out acco | ommodation   |  |   |               |                     | hese duti | [            | job, would you be willing to commute?  UYes UNO  If "Yes", How Far?  Miles. |                          |             |
| Has TILLY'S ever employed you?  □Yes □No  If "Yes" when?   | ou? Starting Date  |   | Salary Desired:  | List names of friends or relatives employed by TiLLY'S, now, or in the past:  How did you learn of this opening? |   |               |                     |           |              |   |                          |             |
|  |                    | ]   | EDUCATIONAL  | L  | BAC   | KGR           | OUND                |           |              |   |                          |             |
| Type Of School   |                    | Name 8  | & Location Of School   |  |   | Maj<br>Area O | jor /<br>f Study    |           |              | 5   | Graduated<br>(Check One) | )           |
| High School  |                    |   |  |  |   |               |                     |           |              |   | Yes No                   |             |
| College  |                    |   |  |  |   |               |                     |           |              |   | Yes No                   |             |
| Graduate School  |                    |   |  |  |   |               |                     |           |              |   | Yes No                   |             |
| Other  |                    |   |  |  |   |               |                     |           |              |   | Yes No                   |             |
|  |                    |   | SKILLS & Q   | U A  | LIFI  | CAT           | IONS                |           |              |   |                          |             |
|  |                    |   | from employment, membership in ex, national origin, ancestry, age, p   |  |   |               |                     |           |              |   |                          | S.          |
|  |                    |   | <u> </u>   |  |   |               |                     |           |              |   |                          |             |

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| activities. If you have less than four places of em<br>employment, please list on a separate piece of paper   | ployme                |                     |                      |          | luring this period that you were unemployed by stating the nature of your ersonal references to be contacted. If you have more than four places of  |  |  |  |  |  |
|---|-----------------------|---------------------|----------------------|----------|---|--|--|--|--|--|
| Name And Address of Company & Type of Business:   | FR<br>MO.             | OM<br>YR.           | MO.                  | O<br>YR. | Describe The Work You Did:  |  |  |  |  |  |
|   | WO.                   | 114.                | WO.                  | 111      |   |  |  |  |  |  |
|   | Endin                 | g Salary            | /:                   |          |   |  |  |  |  |  |
|   | Job T                 | itle:               |                      |          | Reason For Leaving:   |  |  |  |  |  |
| Phone Number:   | Name Of Supervisor:   |                     |                      |          | May This Company Be Contacted For References?   |  |  |  |  |  |
| Name And Address of Company & Type of Business:   | FR<br>MO.             | OM<br>YR.           | MO.                  | O<br>YR. | Describe The Work You Did:  |  |  |  |  |  |
|   |                       |                     |                      |          |   |  |  |  |  |  |
|   | Endin                 | g Salary            | <u>'</u> :           |          |   |  |  |  |  |  |
|   | Job Title:            |                     |                      |          | Reason For Leaving:   |  |  |  |  |  |
| Phone Number:   | Name Of Supervisor:   |                     |                      |          | May This Company Be Contacted For References?   |  |  |  |  |  |
| Name And Address of Company & Type of Business:   | FR<br>MO.             | OM<br>YR.           | MO.                  | O<br>YR. | Describe The Work You Did:  |  |  |  |  |  |
|   |                       |                     |                      |          |   |  |  |  |  |  |
|   | Endin                 | g Salary            | r:                   |          |   |  |  |  |  |  |
|   | Job Title:            |                     |                      |          | leason For Leaving:   |  |  |  |  |  |
| Phone Number:   | Name Of Supervisor:   |                     |                      |          | May This Company Be Contacted For References?   |  |  |  |  |  |
| Name And Address of Company & Type of Business:   | FR<br>MO.             | OM<br>YR.           | MO.                  | O<br>YR. | Describe The Work You Did:  |  |  |  |  |  |
|   |                       |                     |                      |          |   |  |  |  |  |  |
|   | Endin                 | g Salary            | <u>'</u> :           |          |   |  |  |  |  |  |
|   | Job T                 | itle:               |                      |          | Reason For Leaving:   |  |  |  |  |  |
| Phone Number:   | Name                  | Of Sup              | ervisor:             |          | May This Company Be Contacted For References?   |  |  |  |  |  |
| PLEASE READ CAREF   | ULL                   | Y, IN               | ITIA                 | L EA     | ACH PARAGRAPH AND SIGN BELOW  |  |  |  |  |  |
| correct to the best of my knowledge. I further cer  | rtify that<br>any oth | t I, the<br>er docu | undersion<br>ment us | gned app | ely affect my chances for employment and that the answers given by me are true and<br>blicant, have personally completed this application. I understand that omission or<br>cure employment shall be grounds for rejection of this application or for immediate |  |  |  |  |  |
| I hereby authorize TiLLY'S to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to TiLLY'S any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release TiLLY'S, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.   |                       |                     |                      |          |   |  |  |  |  |  |
| I understand that nothing that contains in the application, or conveyed during any interview, which may be granted, or during my employment, if hired, is intended to create an employment contract between Tilly's and me. I understand that, if hired, I may be transferred, reassigned, suspended or demoted. In addition, I understand and agree that if I am employed, my employment will be At-Will and is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or Tilly's, and that no promises or representations contrary to the foregoing are binding on Tilly's unless made in writing and signed by me and Tilly's designated representatives (Tilly's CEO or CFO and Director of Human Resources). |                       |                     |                      |          |   |  |  |  |  |  |
| I hereby agree that in the event of any dispute arising out of submission of this application or my employment with Tilly's (except for workers' compensation claims and unemployment insurance), I and TiLLY'S agree to first try in good faith to settle the dispute by mediation administered by a member of the American Arbitration Association or other mutually agreed upon mediator. The party seeking dispute resolution must provide the other party with a detailed description of the grievance, the facts supporting the grievance and the amount sought at least 30 days before commencing mediation proceedings. TiLLY'S agrees to pay the cost of the mediation.  |                       |                     |                      |          |   |  |  |  |  |  |
| Date: Applicant's Name:   |                       |                     |                      |          | Applicant's Signature:  |  |  |  |  |  |
| FOR OFFICE US   | SE_O                  | NLY                 | ! D                  | O_NO     | T WRITE BELOW THIS LINE!  |  |  |  |  |  |
| Interviewed By: Da  | te:                   |                     |                      | Hired: [ | □Yes □No Job Title:   |  |  |  |  |  |
| Location: Salary / Wages:   |                       |                     | _ □FT                | □P1      | □ Seasonal Date Reporting To Work:  |  |  |  |  |  |
|   |                       |                     | RSC                  | USE      | <u>ONLY</u>   |  |  |  |  |  |
| Hours: Comments:  |                       |                     |                      |          |   |  |  |  |  |  |

EMPLOYMENT HISTORY

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