

Today's Date: \_\_\_\_\_

# Application for Employment

Referred by: \_\_\_\_\_

**www.tjx.com**

Please print clearly in ink. The TJX Companies, Inc. considers all applicants for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, gender identity and expression, marital or military status, or based on any individual's status in any group or class protected by applicable federal, state, or local law. TJX also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. If you require an accommodation in the application process, please advise Management.

## PERSONAL DATA

FULL NAME:

\_\_\_\_\_  
Last First Middle

CURRENT ADDRESS:

\_\_\_\_\_  
Street and Number

\_\_\_\_\_  
City State Zip Code

PREVIOUS ADDRESS:

\_\_\_\_\_  
Street and Number

\_\_\_\_\_  
City State Zip Code

Preferred Name/Nickname (Optional)	Home Telephone Number	Cell Phone Number (Optional)	E-Mail Address (Optional)
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Have you ever applied to HomeGoods, Marshalls, T.J. Maxx or The TJX Companies, Inc.?

Yes  No If yes, provide dates: \_\_\_\_\_

Have you ever worked for HomeGoods, Marshalls, T.J. Maxx or The TJX Companies, Inc.?

Yes  No If yes, provide dates: \_\_\_\_\_ Location: \_\_\_\_\_

Do you know anyone who works for any of the TJX divisions?

Yes  No Name: \_\_\_\_\_

How were you introduced to us?  Employee Referral  Newspaper ad  Walk in  Internet

Other \_\_\_\_\_  College/University  Dept. of Employment  Community Organization

If hired, **and you are under 18**, can you furnish a work permit?  Yes  No  18 or over

If hired, can you provide proof of identify and authorization to work in the United States?  Yes  No

## EMPLOYMENT DESIRED

Position you are applying for: \_\_\_\_\_

Date Available for work\*: \_\_\_\_\_

Total hours available per week\*: \_\_\_\_\_

	S	M	T	W	T	F	S
From							
To							

What type of work are you looking for?  Part-time  Full-time  Regular  Temporary

Are you willing to relocate?  Yes  No If yes, where? \_\_\_\_\_ Will you travel? \_\_\_\_\_

\*Should your availability change during the course of your employment, it may impact your employment status based on business needs. While we may be able to accommodate your availability limitations upon hire, we do not guarantee that we will be able to support these limitations in the future. Should our business needs change, we may require an adjustment in your availability in order to maintain employment status.

## EXPERIENCE

Please give accurate and complete information. Start with present or most recent employer, including self-employment, part-time work, military employment and any work performed on a volunteer basis. Account for your entire employment history, including significant gaps in employment. **All information must be included, even if you are attaching a resume.**

Employer		Work Performed	
Address (Street, City, State)			
Telephone Number(s) ( )			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed		Hourly Rate/Salary	
From:	To:	Starting:	Final:
Employer		Work Performed	
Address (Street, City, State)			
Telephone Number(s) ( )			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed		Hourly Rate/Salary	
From:	To:	Starting:	Final:
Employer		Work Performed	
Address (Street, City, State)			
Telephone Number(s) ( )			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed		Hourly Rate/Salary	
From:	To:	Starting:	Final:
Employer		Work Performed	
Address (Street, City, State)			
Telephone Number(s) ( )			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed		Hourly Rate/Salary	
From:	To:	Starting:	Final:
Employer		Work Performed	
Address (Street, City, State)			
Telephone Number(s) ( )			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed		Hourly Rate/Salary	
From:	To:	Starting:	Final:

Please attach an additional sheet if necessary.

## EDUCATION

Circle highest grade completed:    **Elementary** 6 7 8                      **High School** 9 10 11 12                      **College** 13 14 15 16 17 18 19

HIGH SCHOOL \_\_\_\_\_  
Name of School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

DIPLOMA OR GED RECEIVED:     Yes     No

COLLEGE: (List all, whether or not degree was obtained)

NAME	LOCATION	MAJOR FIELD OF STUDY	MINOR FIELD OF STUDY	DEGREES/ CERTIFICATION	RECEIVED?

May we contact schools you attended to verify the above information?     Yes     No

## SKILLS AND QUALIFICATIONS

Please check all that apply:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Bookkeeping                   | <input type="checkbox"/> Microsoft® Excel       | <input type="checkbox"/> Cash Office      | <input type="checkbox"/> Fork-Lift Operator |
| <input type="checkbox"/> Calculator                    | <input type="checkbox"/> Microsoft® Outlook     | <input type="checkbox"/> Cashier          | <input type="checkbox"/> General Warehouse  |
| <input type="checkbox"/> Data Entry                    | <input type="checkbox"/> Microsoft® Power Point | <input type="checkbox"/> Customer Service | <input type="checkbox"/> Inventory Clerk    |
| <input type="checkbox"/> Financial Reports             | <input type="checkbox"/> Microsoft® Word        | <input type="checkbox"/> Merchandiser     | <input type="checkbox"/> Maintenance        |
| <input type="checkbox"/> General Clerical              |   | <input type="checkbox"/> Sales Associate  | <input type="checkbox"/> Packer             |
| <input type="checkbox"/> Payroll                       |   | <input type="checkbox"/> Stock Room       |   |
| <input type="checkbox"/> Statistical Typing            |   |   |   |
| <input type="checkbox"/> Switchboard                   |   |   |   |
| <input type="checkbox"/> Typing    Typing Speed: _____ | <input type="checkbox"/> Other: _____           |   |   |

List any special training, experience, qualifications or skills relevant to the position for which you are applying:

## PROFESSIONAL REFERENCES

Provide name, work relationship, email address (if available) and telephone number of three supervisors/managers or other professional references that are not related to you:

- 1) \_\_\_\_\_  
Name                                      Work Relationship                                      Email Address                                      Telephone Number
- 2) \_\_\_\_\_  
Name                                      Work Relationship                                      Email Address                                      Telephone Number
- 3) \_\_\_\_\_  
Name                                      Work Relationship                                      Email Address                                      Telephone Number

May we contact any of your references?     Yes     No

If not, who and why? \_\_\_\_\_

## SECURITY

Have you been convicted of a felony in the past seven (7) years?\*     Yes     No

\*In answering this question, you are not obligated to disclose any convictions that have been sealed, annulled, expunged, dismissed, erased, impounded, cleared, vacated, or officially pardoned. **Before** answering this question, please review the specific state exceptions on the following page.

If yes, provide details including date, location (city), nature of offense and disposition: \_\_\_\_\_

NOTE: A conviction record will not necessarily be a bar to employment. This information will only be used for job-related purposes consistent with applicable law. Failure to honestly answer this question will result in discontinued consideration of your application or termination of your employment.

Have you ever taken any merchandise, money, or property from an employer without permission?     Yes     No

If yes, provide details: \_\_\_\_\_

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**California applicants only:** Applicants need not identify convictions that have been sealed, expunged, dismissed or otherwise eradicated by statute or court order, or any information pertaining to referral to and participation in any pre-trial diversion program. Applicants may omit any conviction for Marijuana-related offenses that are more than two years old; any offense which was finally settled in juvenile court or referred to the youth authority; any misdemeanor conviction for which probation has been successfully completed or otherwise discharged AND the case has been judicially dismissed pursuant to Penal Code section 1203.4.

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**Connecticut applicants only:** Applicants for employment are not required to disclose the existence of any arrest, criminal charge, or conviction for which the records have been erased in accordance with the provisions of Connecticut State Law. Records subject to erasure are records pertaining to a finding of delinquency, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle, a criminal charge for which a person has been found not guilty, or a conviction for which a person received an absolute pardon. Any person whose criminal records have been erased in accordance with the provisions of Connecticut State Law shall be deemed to have never been arrested within the meaning of Connecticut General Statutes and may so swear under oath.

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**Georgia applicants only:** You may exclude any conviction that has been discharged under the First Offender's Law.

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**Illinois applicants only:** A conviction record will not necessarily be a bar to employment. Applicants are not obligated to disclose sealed or expunged records of conviction or arrest, or expunged juvenile records of conviction or arrest. Applicants may answer "no record" to inquiries about convictions or arrests in which the records have been sealed or expunged, or to inquiries about juvenile records of convictions or arrests in which the records have been expunged.

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## SIGNATURE

**READ CAREFULLY BEFORE SIGNING AS THESE ITEMS REPRESENT SIGNIFICANT MATTERS IN CONNECTION WITH YOUR APPLICATION:**

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**MARYLAND ONLY: UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT THAT AN INDIVIDUAL SUBMIT OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100. I have carefully read the above Maryland Polygraph Statement and understand the statement.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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I certify that the statements and information furnished by me in this application are true and correct. I understand that omitted, false or misstated statements on this application are grounds for refusal to hire, or dismissal, at any time the Company becomes aware of the omitted, falsified, or misstated information.

I understand that The TJX Companies, Inc. is not obligated to provide me with employment and that I am not obligated to accept employment. I understand that nothing contained in this application, or conveyed during any interview that may be granted, or during my employment, if hired, is intended to create a contract for continued employment with The TJX Companies, Inc., except as required by applicable federal, state, and local law. In addition, if an employment relationship is established, unless I am employed in Montana, I acknowledge that my employment and compensation can be terminated, with or without cause, and with or without notice at any time, at the option of either the Company or myself, and that this cannot be altered except by an express written agreement signed by myself and a designated officer of the Company. I further understand and agree that no manager or other representative of the Company has the authority to make any verbal promises or commitments to me with respect to any term, condition, or privilege of my employment including compensation. I further understand that no policy, benefit, or procedure contained in any employee handbook creates a contract for continued employment. I understand and agree that, if hired, I will be required to abide by all rules and regulations of The TJX Companies, Inc. and that my wages, benefits and conditions of employment can be changed by the Company at any time in its sole discretion.

I agree and hereby authorize The TJX Companies, Inc. to conduct a background inquiry to verify the information on this application and any Company form completed by me. I authorize all previous employers or other persons who have knowledge of me or my records, to release such information to The TJX Companies, Inc. or their agents. I hereby release The TJX Companies, Inc. and any persons or companies that participate in or conduct a background inquire regarding me from all claims or liabilities whatever that may arise by such disclosures or such investigation.

While I understand that this application will be kept on file for a period of up to one year, I further understand that this application will be considered active for a period not to exceed ninety (90) days. I understand that if I wish to be considered for employment beyond this period, I should inquire as to whether or not applications are being accepted for the position for which I am interested and, if so, submit a new application.

**My Signature Certifies That I Have Read and Agree With The Above Statements.**

Date of Application: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_