



APPLICATION FOR EMPLOYMENT

Date (Month, Day, Year) _____

PERSONAL

Name _____
Last
First
Middle

Present Address _____ Telephone Number (Area Code) (_____) _____
 Street Address City State Zip Code

Do you have the legal right to work in the United States? Yes No Are you under the age of 18? Yes No
 Have you ever worked under a different name? Yes No If yes, list name and location below

Name _____ Location _____

GENERAL INFORMATION

1. Have you ever visited a Rite Aid location? Yes No If yes, where? _____ Describe your experience: _____

2. Why would you like to work for Rite Aid? _____

3. Describe a specific situation where you have provided excellent customer service in your most recent position. _____

4. Were you referred by a Rite Aid associate? Yes No If yes, name of associate: _____
5. Have you ever been dismissed or forced to resign from any employment? Yes No If yes, explain: _____

POSITION APPLIED FOR

IF THIS APPLICATION IS FOR A **MANAGEMENT POSITION** CHECK HERE
 STORE MANAGER: Please forward **MANAGEMENT APPLICATIONS** to your Human Resources Manager.

Position _____ Location _____ Date you can start _____

	SUN	MON	TUE	WED	THU	FRI	SAT
MORNING							
AFTERNOON							
EVENING							

EDUCATION

NAME OF SCHOOL LOCATION (CITY, STATE, ZIP CODE)	YEARS COMPLETED	DIPLOMA OR DEGREE RECEIVED/ EXPECTED OR CREDITS EARNED	OVERALL GPA
HIGH SCHOOL			
UNDERGRADUATE COLLEGE			
GRADUATE COLLEGE			
<input type="checkbox"/> MILITARY <input type="checkbox"/> TRADE			
OTHER			

EMPLOYMENT & EXPERIENCE

EMPLOYER AND LOCATION STREET ADDRESS, CITY, STATE, ZIP		POSITION TITLE AND IMMEDIATE SUPERVISOR	STARTING RATE ENDING RATE	REASON FOR LEAVING
FROM MO/YR _____	EMPLOYER (present or most recent) ADDRESS _____	YOUR TITLE SUPERVISOR MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO TELEPHONE NUMBER	\$ \$	
TO MO/YR _____				
FROM MO/YR _____	EMPLOYER ADDRESS _____	YOUR TITLE SUPERVISOR MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO TELEPHONE NUMBER	\$ \$	
TO MO/YR _____				
FROM MO/YR _____	EMPLOYER ADDRESS _____	YOUR TITLE SUPERVISOR MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO TELEPHONE NUMBER	\$ \$	
TO MO/YR _____				
FROM MO/YR _____	EMPLOYER ADDRESS _____	YOUR TITLE SUPERVISOR MAY WE CONTACT? <input type="checkbox"/> YES <input type="checkbox"/> NO TELEPHONE NUMBER	\$ \$	
TO MO/YR _____				

HAVE YOU EVER WORKED FOR RITE AID? Yes No

IF YES DATES OF EMPLOYMENT _____ REASON FOR LEAVING _____

PHARMACISTS, PHARMACY TECHNICIANS & PHARMACY INTERNS ONLY

Registered States

_____ License Number _____

_____ License Number _____

_____ License Number _____

Have you ever had or do you currently have any restrictions on your license? Yes No

If yes, explain below.

CONVICTIONS

California Applicants: Do not identify any misdemeanor conviction for which probation has been successfully completed or otherwise discharged and the case has been dismissed by a court. Also, do not identify marijuana-related convictions entered by the court more than 2 years ago that involve: unlawful possession of marijuana; transportation or giving away of up to 28.5 grams of marijuana, other than concentrated cannabis, or the offering to transport or give away up to 28.5 grams of marijuana, other than concentrated cannabis; possession of paraphernalia used to smoke marijuana; being in a place with knowledge that marijuana was being used; or being under the influence of marijuana.

Connecticut Applicants: Do not identify any arrest, criminal charge or conviction the records of which have been erased by a court based on sections 46b-146, 54-76o or 54-142a of the Connecticut General Statutes. Criminal records subject to erasure under these sections are records concerning a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolle (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been judicially erased under one or more of these sections is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath.

District of Columbia Applicants: Do not identify convictions that were entered by the court more than 10 years ago.

Georgia Applicants: Do not identify any verdict or plea of guilty or nolo contendere that was discharged by the court under Georgia's First Offender Act.

Hawaii Applicants: Do not answer this question at this time. You will only have to answer this question if you receive a conditional offer of employment. At that time you will be asked whether you have been convicted of a crime within the past ten (10) years, excluding any period of time when you were in jail.

Massachusetts Applicants: Do not answer the following question.

Michigan Applicants: Do not identify any pending misdemeanor charges.

Nevada Applicants: You need only disclose convictions for felonies, and within the last 7 years, misdemeanors which resulted in imprisonment. In addition, the discharge and dismissal of certain first time drug offenses, after the accused has completed probation and any required treatment or educational programs, does not constitute a conviction for purposes of employment. An applicant may not be held guilty of perjury or for giving a false statement for failing to acknowledge or disclose the arrest, indictment or trial in response to any inquiry.

New York Applicants: You may answer "no record" concerning any criminal proceeding that terminated in your favor, per section 160.50 of the New York Criminal Procedure Law; any criminal proceeding that terminated in a "youthful offender adjudication," as defined in section 720.35 of the New York Criminal Procedure Law; and any conviction for a "violation" that already has been sealed by the court, per section 160.55 of the New York Criminal Procedure Law.

Ohio Applicants: Do not include convictions for minor misdemeanor drug violations pursuant to Ohio Revised Code §2925.11.

Pennsylvania Applicants (City of Philadelphia ONLY): Do not answer the following question.

Washington Applicants: Do not identify any conviction that is more than ten (10) years old at the time of making this application, unless some period of incarceration resulting from that conviction took place within the last 10 years

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR WHICH HAS NOT SINCE BEEN PLACED UNDER SEAL OR EXPUNGED? YES NO **IF YES, PLEASE EXPLAIN THE NATURE OF THE CRIME(S) AND THE DATE(S) OF THE CONVICTION(S).**

NOTE: (A CONVICTION WILL NOT NECESSARILY DISQUALIFY YOU FROM THE JOB FOR WHICH YOU HAVE APPLIED)

NOTICES

Note to All Applicants Regarding Equal Employment Opportunity: We appreciate your interest in employment at Rite Aid Corporation. Rite Aid is an equal employment opportunity employer. The Company's policy is not to unlawfully discriminate against any applicant or employee on the basis of race, color, sex, religion, national origin, age, disability, or any other basis protected by applicable federal, state, or local laws. The Company also prohibits harassment of applicants and employees based on any of these protected categories.

Note to All Applicants Regarding Rite Aid's Smoking Policy: Smoking is prohibited in all indoor areas of Rite Aid buildings unless designated smoking areas have been established by a particular location in accordance with applicable state and local law.

Note to Rhode Island Applicants: Rite Aid is subject to Chapters 29-38 of Title 28 of the General Laws of Rhode Island, and is therefore covered by the state's workers' compensation law.

Note to Massachusetts Applicants: Please initial the following statement to confirm that you are aware of its contents:
I understand that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Initial Here: _____

Note to Maryland Applicants: Please initial the following statement to confirm that you are aware of its contents:
I UNDERSTAND THAT UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT ANY INDIVIDUAL SUBMIT TO 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.

Initial Here _____

STATEMENT OF APPLICANT

I certify that the above statements are true, and I understand that the making of false statements or omitting information will be considered sufficient cause for immediate discharge upon discovery thereof. I understand that any employment offered to me will be on a probationary trial basis. I further understand that unless specifically altered by a written employment contract, executed by an officer of the Company, my employment will be terminable at will and at any time either by myself or Rite Aid. I authorize Rite Aid to make inquiry of any former employers or references as to my experiences, salary, character, habits, or reasons for leaving. If employed by the Company, I understand that I may be required to submit to a drug test in accordance with Rite Aid's drug testing policy.

Applicant's Signature _____ Date _____

RITE AID IS AN EQUAL OPPORTUNITY EMPLOYER