

Application Date

# APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without regard to race, color, religion, sex, and national origin

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Are you known to schools or references by any other name?  Yes  No

If yes, by what name?

Have you filled out an application or been employed here before?  Yes Date(s) \_\_\_\_\_ No

Location Preferences \_\_\_\_\_ Salary Expectations \_\_\_\_\_

Are you a citizen of the United States?  Yes  No

If not, do you possess an Alien Registration Card?  Yes  No

Do any of your friends or relatives work here?  Yes  No

If yes, list name(s) \_\_\_\_\_

Are you under 18?  Yes  No If yes, do you have a work permit?  Yes  No

Have you been convicted of a crime other than a traffic violation?  Yes  No

If yes, describe in full, including date(s) \_\_\_\_\_

POSITION APPLIED FOR	ARE YOU CURRENTLY EMPLOYED?	IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER?
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<b>PREVIOUS EMPLOYMENT</b>	PLEASE EXPLAIN ANY GAP IN EMPLOYMENT HISTORY
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LIST MOST RECENT EMPLOYMENT FIRST		NAME AND LOCATION	POSITION	SALARY	REASON FOR LEAVING	SUPERVISOR'S NAME PHONE NUMBER
FROM	TO					
1						
2						
3						
4						

## OTHER INFORMATION

Which stores do you shop for clothing?

What brand name clothing do you like?

## EDUCATIONAL HISTORY

	Elementary	High	College/ University	Graduate/ Professional
School Name				
Dates Attended				
Years Completed				
Diploma/Degree				
Describe Course of Study				

Other specialized training, apprenticeship, skills, and extracurricular activities

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## PERSONAL REFERENCES

LIST 3 NON-RELATIVES WHOM YOU HAVE KNOWN FOR AT LEAST 1 YEAR

	NAME AND ADDRESS	TELEPHONE	RELATIONSHIP/ YEARS KNOWN
1			
2			
3			

**ALL APPLICANTS MUST READ THE FOLLOWING:**

### AGREEMENT

This application is valid for 30 days. If you have not been employed within 30 days, you must re-apply in writing in order to receive further consideration.

- 1) I will authorize this company to inquire of my former employers and others to my past record without liability.
- 2) I consent to take any physical examinations requested by the Company in connection with the processing of my application for employment should I be offered and accept a job.
- 3) I understand that any false answers or statements on my application, including but not limited to false answers, or statements or misleading omissions made during interviews or physical examinations, can be sufficient grounds for my rejection as a candidate for employment or immediate discharge.

I certify that the answers herein are true and complete to the best of my knowledge.

Signature of Applicant

Date

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### Do Not Write Below This Line

(Hiring Manager's Use Only)

Hired  Yes  No Position \_\_\_\_\_ Department \_\_\_\_\_

Salary/Wage \_\_\_\_\_ Date to report to work \_\_\_\_\_

Approved \_\_\_\_\_  
 1. Human resources                      2. Department Head                      3. CFO or VP of Stores