

# EMPLOYMENT APPLICATION

## Personal Information

Please print. You must fully and accurately complete this application. Incomplete applications will not be considered.

Position(s) applying for: \_\_\_\_\_ Date of application: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_  
Last First MI

Address: \_\_\_\_\_  
Street City State Zip

Are you 16 or older?:  Yes  No Are you 18 or older?:  Yes  No

List outside activities (please do not list activities that would reflect race, color, religion, sex, national origin, disability or ancestry): \_\_\_\_\_

Have you ever worked for this company before?:  Yes  No If yes, give dates employed: \_\_\_\_\_

Are any of your relatives employed by this company?:  Yes  No If yes, please list name(s), relationship and store location below:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Location: \_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime, excluding misdemeanors and traffic violations?:  Yes  No

If yes, describe in full: \_\_\_\_\_  
(The existence of a criminal record will not automatically disqualify you from the job you applied for.)

Wage expected: \_\_\_\_\_ per hour If necessary, when would be the best time to call you at home?: \_\_\_\_\_

## Work Availability

Type of employment desired:  Full-time  Part-time

Number of hours available per week: \_\_\_\_\_

Do you have any commitments to another employer that might affect your employment with us?:  Yes  No

Are you legally eligible for employment in this country (a US citizen or alien authorized to work in the United States)?:  Yes  No

Date available for work: \_\_\_\_\_

To help us consider a job that matches your availability, please specify the days and the time each day you would be available to work.:

Monday \_\_\_\_\_  Friday \_\_\_\_\_  
 Tuesday \_\_\_\_\_  Saturday \_\_\_\_\_  
 Wednesday \_\_\_\_\_  Sunday \_\_\_\_\_  
 Thursday \_\_\_\_\_

## Educational History

Circle last grade completed in high school: 8 or less 9 10 11 12 GED Your average grades?: \_\_\_\_\_

Name and location of school: \_\_\_\_\_

Circle last year of college, tech or business school: 1 2 3 4 Did you graduate?:  Yes  No

Your average grades?: \_\_\_\_\_ Your major course of study?: \_\_\_\_\_

Name and location of school: \_\_\_\_\_

What school activities and organizations including athletics did you participate in?: (Please do not list those activities which would reflect race, color, religion, sex, national origin, disability or ancestry.) \_\_\_\_\_

What scholastic honors did you receive?: \_\_\_\_\_

## US Military Service

Branch of service: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Describe any special training: \_\_\_\_\_