
**AN EQUAL OPPORTUNITY EMPLOYER
EMPLOYMENT APPLICATION**

Position Applied For: _____

Expected Earnings: _____

APPLICANT INSTRUCTIONS:

This application form is intended for use in evaluation your qualifications for employment and should not be considered an employment contract. All qualified applicants will receive consideration without discrimination due to sex, marital status, race, religion, age, creed, national origin or the presence of disabilities. Please note additional testing of job-related skills may be required for employment. Depending upon Company policy and the needs of the position, you may also be required to undergo and pass a medical exam, a Criminal Check and/or a Credit Background Check and an Assessment Test. If this is necessary, you will be notified after an offer of employment has been extended, but prior to reporting to work.

If you need assistance in completing this application form or during any phase of the interview process, please alert the person who gave you this form and every effort will be made to accommodate your needs in a reasonable amount of time. Do:

- Answer all questions completely and accurately.
- Use the comments section on the back of this form if more space is needed to complete any section.
- Print clearly, as incomplete or illegible applications may not be processed.

DATE: _____

Name (Last)

(First)

(M.I.)

Present Address (Street, City, State, Zip)

Social Security Number

Home Phone Number

If you are under 18, can you furnish a work permit? Yes ___ No ___

Are you authorized to work in the United States and able to provide proper documentation, if hired? Yes ___ No ___
(Proof of employment eligibility or immigration status will be required upon employment).

Have you worked for the Company previously? Yes ___ No ___
If so, where? when?

How were you referred to us? (Please Circle)

Advertisement

Current Associate

Employment Website

Recruiter

Other

Have you been convicted of a felony in the past seven years? Yes ___ No ___ If so, please describe below. (Please note such a conviction may be relevant if job-related, but does not necessarily bar you from employment.)

AVAILABILITY:

Would You Prefer: Full Time ___ (OR) Part Time ___ / Temporary ___ (OR) Seasonal ___

For which schedule are you available? Weekdays ___ Weekends ___ Daytime ___ Evenings ___ Overtime ___ Other ___
(check all that apply)

EDUCATION:

Name	City/State	Course of Study	Did You Graduate?	Degree Received
High School				
College				
Other				

SKILLS AND EXPERIENCE:

Summarize below any special skills and qualifications acquired from employment or other experiences that may qualify you for work with our Company.

EMPLOYMENT HISTORY: All questions in this section must be completed in order for your application to be considered. Since we may make every effort to contact previous employers, the correct telephone numbers of past employers are important.

Most Recent Employer's Name & Address: _____

Dates of Employment: From _____ To _____ Position: _____
Salary: _____ Supervisor's Name & Title: _____
Supervisor's Telephone Number: _____ Reason For Leaving: _____
Describe Your Duties & Responsibilities: _____

Second Most Recent Employer's Name & Address: _____

Dates of Employment: From _____ To _____ Position: _____
Salary: _____ Supervisor's Name & Title: _____
Supervisor's Telephone Number: _____ Reason For Leaving: _____
Describe Your Duties & Responsibilities: _____

Third Most Recent Employer's Name & Address: _____

Dates of Employment: From _____ To _____ Position: _____
Salary: _____ Supervisor's Name & Title: _____
Supervisor's Telephone Number: _____ Reason For Leaving: _____
Describe Your Duties & Responsibilities: _____

OTHER REFERENCES: Include only those familiar with your work ability. Do not list relatives.

	<u>Name</u>	<u>Address/Phone</u>	<u>Years Known/Relationship</u>
1.	_____	_____	_____
2.	_____	_____	_____

COMMENTS: (Ask for additional page, if necessary)

CERTIFICATION AND RELEASE: I certify that I have read and understand the applicant instructions on the front of this form and that the answers and statements given by me on this form are complete and true to the best of my knowledge. I understand and agree that any false information, omissions or misrepresentations of facts asked for during this application process may result in rejection of my application or discharge at any time during my employment. I authorize the Company to verify any or all of this information and I hereby release from liability the Company and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information, and understand that in no way does this application guarantee employment or create an employment contract with the Company. I authorize the Company to tape record and videotape my actions during the course of the Secret Shopper program.

DATE: _____ **SIGNATURE:** _____
DO NOT WRITE BELOW THIS LINE:
Interviewed By: _____ Date: _____ Date References Checked (attach sheet) _____
Starting Salary/Rate: _____ Date Hired: _____ Position: _____ Start Date: _____
Work Schedule: _____
Manager's Signature: _____ Date: _____