



Our policy is to provide equal opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date: _____

Full Name: _____ Date of Birth: _____

Street Address: _____

Telephone (cell): _____ Email: _____

Position applied for: _____

How did you hear of this opening? _____

When can you start? _____ Desired Wage \$ _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis?

(You may be required to provide documentation.) _____ Yes _____ No

Are you looking for full-time employment? _____ Yes _____ No

If no, what hours are you available? _____

Are you willing to work Saturdays? _____ Yes _____ No

Are you willing to work occasional holidays? _____ Yes _____ No

Have you ever been convicted of a felony?

(This will not necessarily affect your application.) _____ Yes _____ No

If yes, please describe conditions. _____

Education	School Name and Location	Year	Degree
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High School	_____		
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College	_____		
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College	_____		
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Post-College	_____		
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Other Training	_____		
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In addition to your work history, what other skills, qualifications, or experience should we consider?

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____

Starting Position _____

Date Ended _____ Ending Wage _____

Ending Position _____

Name of Supervisor _____

May we contact? ☐ Yes ☐ No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____

Starting Position _____

Date Ended _____ Ending Wage _____

Ending Position _____

Name of Supervisor _____

May we contact? ☐ Yes ☐ No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____

Starting Position _____

Date Ended _____ Ending Wage _____

Ending Position _____

Name of Supervisor _____

May we contact? ☐ Yes ☐ No

Responsibilities _____

Reason for leaving _____

Department Interests (circle all that apply):

Clothing	Books	Shoes
Furniture	Housewares	Accessories
Electronics	Appliances	

Skills that may be helpful: _____

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature _____

Date _____