

Application for Employment

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

Date		
Last name	First name	
Street Address		
City	State	ZIP
Telephone	Email	

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.) \Box Yes \Box No

Have you worked for The Idea Store before? Ves No Dates_____

Employment Desired

Position applied for

Are you	presently	employed?	□ Yes	🛛 No
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May we contact ye	our present em	ployer?	Yes 🛛 N	0
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Date you can start_____

Availability

Please list your availability below. Staff work in the store from 11:30-6:30 Tue-Fri, 8:30-6:30 Sat, and 11:30-5:30 Sun.

Tuesday	Friday
Wednesday	Saturday
Thursday	Sunday

Employment History	(Start with most recent employer))
Company Name		
	Teleph	
Date Started	Date Ended	
Name of Supervisor		
May we contact? Yes		
Responsibilities		
Reason for leaving		
Company Name		
Address	Teleph	one
Date Started	Date Ended	
Name of Supervisor		
May we contact?		
Responsibilities		
Reason for leaving		
Company Name		
Address	Teleph	one
Date Started	Date Ended	
Name of Supervisor		
May we contact?	□ No	
Responsibilities		
Highest Level of Education	n Completed	
In addition to your work hi consider?	story, are there other skills, qualificatio	ons, or experience that we should

References

List three professional references, not related to you, who have known you for more than one year. If this is your first job you can use teachers, coaches, etc. as your references.

Name	Phone	Years Known
Name	Phone	Years Known
Name	Phone	Years Known

Please Read Before Signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment. I have received from the company a list of the approved documents that are required.

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 hereby acknowledge that I have read and understand the above statements.

Signature _____ Date_____