



TEAM MEMBER APPLICATION FORM

Please print and e-mail the completed application to the store for which you are applying. E-mail addresses are found under the "locations" tab.

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, creed, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, and any other legally protected status. It is our policy to abide by all Federal, State and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

PERSONAL INFORMATION			
Last Name	First	Middle	Date of Application
Street Address			Home Phone
City, State, Zip			How long at present address?
Were you previously employed by this organization? <input type="checkbox"/> Yes, Date(s)		Department	<input type="checkbox"/> No Social Security No.
Have you previously applied to this organization? <input type="checkbox"/> Yes, Date(s)		Department	<input type="checkbox"/> No Driver's License No. (if applicable)
Position Applying For:		If hired, how long do you expect to stay?	Wages Expected
Check the following options which you would consider: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		In case of emergency, notify:	Phone:
Are you willing to work nights, weekends and holiday? <input type="checkbox"/> Yes <input type="checkbox"/> No (Explain)		Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date available for work

EDUCATION AND TRAINING					
School	Name & Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Diploma or Degree
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Apprentice School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
List any other education, training, special skills or certificated/licenses that you possess:					
List any machines or equipment that you are qualified and experienced at operating:					

ADDITIONAL EMPLOYMENT RELATED INFORMATION		
List any relatives or friends working for this organization:	NAME	RELATIONSHIP

Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are under 18, can you furnish a work permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to perform the job(s) for which you are applying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a crime in the past 7 years, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes", please describe in detail.		

REFERENCES: GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN AT LEAST ONE YEAR				
Name	Address	Phone	Business	Years Known

LIST PREVIOUS EMPLOYERS STARTING WITH THE MOST RECENT					
Name & Address	Position/Salary	From/To	Reason for Leaving	Supervisor & Phone No.	May We Contact?

APPLICANT'S CERTIFICATION – PLEASE READ CAREFULLY BEFORE SIGNING	
<p>I certify that, to the best of my knowledge and belief, the answers given by me to the forgoing questions and the statements made by me in this application are correct and complete. I understand that misrepresentation or omission of facts in this application may result in my discharge.</p> <p>I authorize you to communicate with those employers I designated, school officials and person named as references concerning my skills, character, and responsibility.</p> <p>If employed, I understand and agree that such employment may be terminated at any time, without prior notice, and that my employment will not be governed by any expressed or implied contract but is at-will.</p>	
Applicant's Signature	Date