



APPLICATION FOR EMPLOYMENT

(PLEASE PRINT)

GENERAL INFORMATION

DATE ____/____/____ NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

TELEPHONE NUMBER (____) _____ SOCIAL SECURITY NUMBER ____-____-____

How did you learn about this position? _____

Are you under 16 years of age? ____ Yes ____ No

Have you worked at Nobbies before? ____ Yes ____ No If yes, give starting and ending date: _____ to _____

Are you able, at the time of employment, to submit verification of your legal right to work in the United States? ____ Yes ____ No

Note: If hired, by law you must complete an I-9 form required by the U.S. Immigration & Naturalization Service within your first three days of employment

EMPLOYMENT EXPERIENCE (Begin with the most recent)

Employer	Phone ()	Dates Employed		Work Performed
		From	To	
Address				
Job Title	Supervisor	Rate/Salary		
		Starting	Final	
Reason for Leaving				May we contact this employer? ____Yes ____No
Employer	Phone ()	Dates Employed		Work Performed
		From	To	
Address				
Job Title	Supervisor	Rate/Salary		
		Starting	Final	
Reason for Leaving				May we contact this employer? ____Yes ____No
Employer	Phone ()	Dates Employed		Work Performed
		From	To	
Address				
Job Title	Supervisor	Rate/Salary		
		Starting	Final	
Reason for Leaving				May we contact this employer? ____Yes ____No
Employer	Phone ()	Dates Employed		Work Performed
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Job Title	Supervisor	Rate/Salary		
		Starting	Final	
Reason for Leaving				May we contact this employer? ____Yes ____No

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		Starting	Final	
Reason for Leaving				

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected class.

POSITION DESIRED _____ WAGE DESIRED _____

PLEASE LIST THE SPECIFIC HOURS YOU ARE AVAILABLE TO WORK EACH DAY:

DAY	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
FROM:							
TO:							

Indicate the number of hours you would like to work weekly _____ Date available to begin ____/____/____

EDUCATION AND TRAINING

SCHOOL	NAME OF SCHOOL	CITY	MAJOR COURSES OR SUBJECTS	YEAR OF GRADUATION
High School				
College or University				
Other/ Special Training				

Please indicate the tasks/positions in which you have training and/or experience

- Acct.'s Payable/Receivable
 Desktop Publishing
 Inventory Control
 Retail Floor Sales
 Advertising
 Driver
 Merchandising
 Stocking Crew
 Buyer/Purchasing
 General Office
 MS Excel
 Typing – WPM _____
 Data Entry
 General Warehouse
 MS Word
 10 Key

Describe any other special skills/qualifications you have (i.e. make-up, costuming, balloons, artistic ability, computer programs etc.)

REFERENCES

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

1. _____ (____) _____
2. _____ (____) _____
3. _____ (____) _____

Have you been convicted of a felony or misdemeanor within the last 5 years? Yes No

Describe _____

*You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

APPLICANT'S AGREEMENT

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. I give the employer the right to investigate all references and to secure additional information about me, if job related, I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information. I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

Applicants Signature _____

Date ____/____/____