

APPLICATION FOR EMPLOYMENT

Incahoots

Name _____ Date _____
Phone _____
Last First Middle

Present Address _____
Number and Street City, State, and Zip

If at present address less than 1 year, give previous address _____
Number and Street City, State, and Zip

Are you lawfully employable in the United States? Yes [] No []
Do you have the legal right to reside in this country? Yes [] No []
If not, can you provide a visa, labor certificate and/or a work permit? Yes [] No []
Are you interested in working full time or part time? _____
(If part time, specify hours and days _____)
Due to the nature of retail sales, it sometimes becomes necessary to work evenings, Saturdays, Sundays, and holidays. Are you available to work at these times? Yes [] No []
If not, which times are you not available? _____
What date can you begin work? _____

EDUCATIONAL BACKGROUND

Did you complete High School? Yes [] No [] If not, last grade completed _____
High school name and address _____
Course of Study _____
Number of years completed _____ Did you graduate? Yes [] No [] Diploma/Degree received _____
Activities/Scholastic honors _____

College name and address _____
Course of study _____
Number of years completed _____ Did you graduate? Yes [] No [] Diploma/Degree received _____
Activities/Scholastic honors _____

Other - name and address _____
Course of study _____
Number of years completed _____ Did you graduate? Yes [] No [] Diploma/Degree received _____
Activities/Scholastic honors _____

Vocational (Include military training) _____

Special Skills _____

RECORD OF BUSINESS EXPERIENCE

Present or last position - Firm Name _____
Address _____ Phone _____
From _____ to _____ Supervisor's name _____ May we contact? _____
Job title and duties _____
Salary -Beginning _____ hr/wk/mo, Ending _____ hr/wk/mo _____
Reasons for leaving _____

Previous position - Firm Name _____
Address _____ Phone _____
From _____ to _____ Supervisor's name _____ May we contact? _____
Job title and duties _____
Salary -Beginning _____ hr/wk/mo, Ending _____ hr/wk/mo _____
Reasons for leaving _____

Previous position - Firm Name _____
Address _____ Phone _____
From _____ to _____ Supervisor's name _____ May we contact? _____
Job title and duties _____
Salary -Beginning _____ hr/wk/mo, Ending _____ hr/wk/mo _____
Reasons for leaving _____

May we contact the employers listed above? _____ If not, indicate below which employer(s) you do not wish us to contact. _____

Have you done sales work before? _____ If so, what did you sell? _____
Where? _____

What experience have you had in our company's lines of goods and services? _____

Have you operated a POS System register? _____

In the space below, briefly set forth why you think you would make a good employee. _____

PLEASE READ COMPLETELY AND CAREFULLY BEFORE SIGNING

Physical Information

Some of our jobs may have specific physical requirements or limitations. If you are applying for such a position, our personnel staff will ask you about any physical limitations or disabilities that would be dangerous to you or your fellow employees if you were to fill this particular position. Such questions must be related to your potential performance on the job for which you are applying.

Equal Opportunity Employer

If you have any questions regarding this application please ask the representative of this firm before signing. This firm is an equal opportunity employer and does not discriminate on the basis of sex, age, race, religion, marital status, national origin, disability, or veteran status. Any statement or implication to the contrary is expressly repudiated.

Interviews

Interviews and hiring are on a competitive basis, using job-related factors after a written application has been received and reviewed. Because an application has been received, it does not necessarily mean an interview will be granted.

Termination - Permission to Acquire Information

If employed, I agree to conform to this firm's rules and regulations as set forth now or hereafter in any of their operations and policy manuals and other communications. I understand that non-conformity is grounds for dismissal. I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal. Permission, unless indicated to the contrary, is granted to confirm by personal inquiry or such other necessary means the information set forth herein. Any information so obtained shall remain confidential. I understand that the Immigration Reform and Control Act may require me to prove the legality of my residency or citizenship and that failure to do so may cause the termination of my employment, with or without notice to me. I further understand and agree that, at any time, my employment and compensation can be terminated, with or without cause, and without notice, at the option of my employer.

Applicant's Signature _____