

EMPLOYMENT APPLICATION

Programs, services, and employment are equally available to everyone. Please inform the Store Manager if you require reasonable accommodation for the application or interview. To ensure accuracy, please print neatly in upper-case letters and numbers, using a dark, ball-point pen.

	Α	pplicant Dat	a		
Fu	Il Name:				
Employee Address:					
Home	Phone:		Cell Phone:		
Email A	Address:		Date of Application:		
Social Security I	Number:		Start Date:		
Store of Employme	ent desired:				
Type of Employme	nt desired				
Have you ever wor	ked for this company before?	□ No If	so, when?		
Are you legally allowed to work in the United States					
If you are under 18 years of age, can you provide a work permit?				□ Yes □ No	
If no, please explai	n:				
Have you ever plead guilty, no contest, or been convicted of a crime?					
Answering yes to this question does not constitute an automatic rejection for employment. Date of offense, seriousness and nature of the violation,					
rehabilitation and position applied for will be considered. If yes, give dates and details:					
Summarize Your Special Skills or Qualifications					
Do you have previous retail experience?					
Do you have in-depth knowledge of sporting goods? □ Yes □ No					
Do you have in-depth knowledge of running shoes/cleats? □ Yes □ No					
Do you have in-depth knowledge of skateboards? □ Yes □ No					
		Availability			
		Availability			
Sunday:					
				on of employment, we require at	
Monday:		lea	least three days of availability, one of which must be a Saturday and/or Sunday.		
Tuesday:					
\\/ a dia a a dia ()			Hours of	Operation	
Wednesday:			Monday - Saturday		
Thursday:			9 am - 9 pm <u>Sunday</u> 11 am - 6 pm		
marsuay.		_			
Friday:					
Saturday:			Scheduled Vacation Dates:		

Did you Subjects Studied Name & Location of School Attended High School: College: Other: **Previous Employment** Dates of Employment: Postion(s) Held: Company Name: Company Address: Supervisor: Phone: Starting Salary: **Ending Salary:** Responsibilities: Reason for Leaving: \square No May we contact this employer for a reference? □ Yes Dates of Employment: Postion(s) Held: Company Name: Company Address: Supervisor: Phone: **Ending Salary:** Starting Salary: Responsibilities: Reason for Leaving: May we contact this employer for a reference? □ Yes Dates of Employment: Postion(s) Held: Company Name: Company Address: Supervisor: Phone: Starting Salary: Ending Salary: Responsibilities: Reason for Leaving: May we contact this employer for a reference? $\quad \ \, \Box \,\, Yes$ □ No Personal References Reference Name: Relationship: Contact Phone: Contact Email: Relationship: Reference Name: Contact Phone: Contact Email: I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application. In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in employment termination. Signature of Applicant: Date:

Education