



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

DATE:

NAME:

LAST FIRST MIDDLE

PRESENT ADDRESS:

CITY: STATE: ZIP:

PHONE NUMBER: SOCIAL SECURITY NO.:

LENGTH OF TIME AT PRESENT ADDRESS:

If you are under 18, can you furnish a work permit? YES NO

Are you legally eligible for employment in this country? YES NO

Proof of U.S. Citizenship or immigration status will be required upon employment.

EMPLOYMENT DESIRED:

Position(s) applying for:

Years of experience in this field Know or Related to Current Employee?

Date you can start: Salary Desired:

Are you employed now? YES NO If so may we inquire of your present employer? YES NO

Current work schedule (shift/hours)?

Ever applied to this company before? YES NO When?

EDUCATION:

Table with columns: School, Name and Address of School, Dates Attended (From, To), Date of Graduation, Number of Hours (Earned, Now Carrying), Fields of Study (Major, Minor), Degree, Diploma, or Certificate Earned. Includes rows for High School, Under Graduate College or University, Graduate College or University, Vocational, Business, Technical, and Apprenticeship.

GENERAL:

Have you been convicted of a felony in the last 7 Years YES NO

Such a conviction may be relevant if job related, but does not necessarily bar you from employment.

If Yes, please explain:

COMMENTS:

LONG-TERM VISIONS:

Play Mart, Inc.

Employment History: Begin with your most recent job and provide as much detail as possible. Be sure to complete each blank in this section thoroughly and accurately as changes you wish to make after submitting this application must be verified by employer.

A.		Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From									1. _____
Title of Position									2. _____
Starting Salary				Last Salary					3. _____
Average hours worked per week									4. _____
Reason for leaving									5. _____
Name of Employer									6. _____
Address									7. _____
Type of Business									
Name & title of your supervisor									
	From			To				Number	
	Mo.	Day		Mo.	Day			Supervised	
I was a supervisor									

  

B.		Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From									1. _____
Title of Position									2. _____
Starting Salary				Last Salary					3. _____
Average hours worked per week									4. _____
Reason for leaving									5. _____
Name of Employer									6. _____
Address									7. _____
Type of Business									
Name & title of your supervisor									
	From			To				Number	
	Mo.	Day		Mo.	Day			Supervised	
I was a supervisor									

  

C.		Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From									1. _____
Title of Position									2. _____
Starting Salary				Last Salary					3. _____
Average hours worked per week									4. _____
Reason for leaving									5. _____
Name of Employer									6. _____
Address									7. _____
Type of Business									
Name & title of your supervisor									
	From			To				Number	
	Mo.	Day		Mo.	Day			Supervised	
I was a supervisor									

  

D.		Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From									1. _____
Title of Position									2. _____
Starting Salary				Last Salary					3. _____
Average hours worked per week									4. _____
Reason for leaving									5. _____
Name of Employer									6. _____
Address									7. _____
Type of Business									
Name & title of your supervisor									
	From			To				Number	
	Mo.	Day		Mo.	Day			Supervised	
I was a supervisor									

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E.	Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From	<input type="text"/>	<input type="text"/>	<input type="text"/>	To	<input type="text"/>	<input type="text"/>	<input type="text"/>	1. _____
Title of Position	_____							2. _____
Starting Salary	_____			Last Salary	_____			3. _____
Average hours worked per week	_____							4. _____
Reason for leaving	_____							5. _____
Name of Employer	_____							6. _____
Address	_____							7. _____
Type of Business	_____							
Name & title of your supervisor	_____							
	From		To		Number Supervised			
	Mo.	Day	Mo.	Day				
I was a supervisor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				
F.	Mo.	Day	Yr.	To	Mo.	Day	Yr.	<b>Job Duties:</b>
Employed From	<input type="text"/>	<input type="text"/>	<input type="text"/>	To	<input type="text"/>	<input type="text"/>	<input type="text"/>	1. _____
Title of Position	_____							2. _____
Starting Salary	_____			Last Salary	_____			3. _____
Average hours worked per week	_____							4. _____
Reason for leaving	_____							5. _____
Name of Employer	_____							6. _____
Address	_____							7. _____
Type of Business	_____							
Name & title of your supervisor	_____							
	From		To		Number Supervised			
	Mo.	Day	Mo.	Day				
I was a supervisor	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>				

**REFERENCES**

Give below the names of three persons not related to you whom you have known at least one year.

NAME	ADDRESS	PHONE

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from Play Mart's service if I have been employed. Furthermore, I understand that just as I am free to resign at any time, Play Mart reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of Play Mart has the authority to make any assurances to the contrary.

I give Play Mart the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability Play Mart and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

Play Mart is an equal opportunity employer. Play Mart does not discriminate in employment and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.

**I also understand that Play Mart, Inc. is a drug free workplace and that substance abuse testing is required prior to employment.**

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**Authorization to Release Information**

As an applicant for a position with Play Mart, Inc., I have been asked to supply information assessing my background and qualifications. To facilitate this process, I hereby authorize the investigation of my past work, education, military service, character, and police records, to determine any and all information, which is or may be, pertinent to my qualifications for employment.

I hereby authorize you to provide any and all information, of record or not, and release you and all persons, agencies, companies and any firms from any damages that may result from providing such information.

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_ WITNESS: \_\_\_\_\_

**PLEASE PRINT CLEARLY**

Full Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

**OFFICIAL USE ONLY**

Received a copy of Summary of Accrued Time Policy:     YES     NO

Received a copy of Benefit Package Summary:         YES     NO

Comments:

\_\_\_\_\_  
APPROVED

\_\_\_\_\_  
DATE