



APPLICATION FOR EMPLOYMENT

Personal Information

Name: _____ Date: _____
(Last Name) (First Name) (Middle)

Present Address: _____
(Number & Street) (City) (State) (Zip)

Home Phone: _____ Cell Phone: _____

Email Address: _____

Position Applying For: _____

How did you hear about this position? : _____

Date available to start: _____

Are you at least 16 years of age or older? Yes No

If hired, can you supply the required documentation to verify your lawful right to work in the United States? Yes No

Have you ever worked for Martins of Effingham before? Yes No

If yes, dates and dept.? _____

List any friends or relatives working here: _____
(Name) (Relationship)

Availability

When are you available to work? Full Time Part Time Weekends

List any days or hours you are unable to work: _____

United States Military

Do you have United States Military experience? Yes No

Date entered: _____ Date discharged: _____

Rank at time of discharge: _____ Present Military status: _____

Special skills or training from service: _____

Education

Name of School	Location	Please circle the last year completed				Degree Earned/Major
<i>(High School)</i>		1	2	3	4	
<i>(College)</i>		1	2	3	4	
<i>(Other)</i>		1	2	3	4	

Work Experience

List your last three employers below beginning with the most recent.

Company Name: _____	
Position: _____	
Address & Phone: _____	
Hire Date: _____	Termination Date: _____
Supervisor Name & Title: _____	
Reason for Leaving : _____	

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Position: _____	
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Position: _____	
Address & Phone: _____	
Hire Date: _____	Termination Date: _____
Supervisor Name & Title: _____	
Reason for Leaving : _____	

Are there any other places you have worked in addition to those listed above? Yes No

Which of these employers can we contact for a reference regarding your job performance?

Please list any additional experience: _____

By signing below, I certify that all facts contained in this application are true and complete to the best of my knowledge. I understand that omission or misrepresentation of facts may be grounds for rejection of this application or for dismissal from employment if subsequently discovered. I also authorize the company to request references from my former employers. I acknowledge that consideration for employment is contingent on the results of a reference check and drug screen. Therefore, I hereby authorize the company to analyze the truthfulness of all statements made on this application and to discuss those results with other employees of the company involved in the hiring process. I give my consent for all contacted persons including former employers to provide information concerning this application. I release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period, and regardless of the date of payment of my wages or salary, I may be terminated at any time without any prior notice. I understand that nothing contained in this application, or the granting of an interview is intended to create an employer/employee relationship between Martins of Effingham and myself either for employment or for the providing of any benefits. No promises regarding employment have been made to me.

I understand that any offers of employment will be contingent upon my taking and successfully passing a drug and/or alcohol test and background check in accordance with company policy. If I refuse to testing, refuse to sign the consent form, or test positive to drugs or alcohol, the company will not employ me.

In consideration of my employment, I agree to comply with all rules, regulations, and employment policies of the employer and agree to the terms above.

Date: _____ Applicant's Signature: _____

FOR OFFICE USE ONLY

Proceed with job offer? _____ YES _____ NO

Position: _____ Department: _____

Full-Time Part-Time Rate of Pay: _____

Store Manager Signature: _____

Supervisor Signature : _____

Provide this Application Form along with the Interview Notes to the Office Manager to make the offer to the candidate.