

NAME: _____
(Last) (First) (Middle Initial)

(please print plainly)

Date: _____



WELCOME:

We appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us in possible future promotions.

PERSONAL INFORMATION:

Address _____
(number) (street) (city) (state) (zip code)

Phone Number _____ Social Security Number _____
(area code)

Have you previously filed an application with us? _____ If so, date _____

Were you previously employed by us? _____ If so, when, and why did you leave? _____

Position desired _____ Salary desired \$ _____

Would you like to work full time? _____ or part time? _____ Are you willing to work evenings? _____ weekends? _____

What days of the week or hours of the day would you NOT be able to work? _____

When could you start employment? _____

How long do you expect to work at Allen's - 6 months, 12 months, or permanently? Please explain: _____

Have you ever been dismissed from a job for misconduct, poor work, or dishonesty? _____

Do you have any friends or relatives who now work at Allen's, If so, who are they and are they friends or relatives? _____

AUTHORIZATION & UNDERSTANDING

Upon the signing of this application, I certify that all of the information now or hereafter give by me in support of my application for employment is true and complete. I authorize you to verify any of the information concerning my employment, education, or credit history with the appropriate individuals, companies, institutions, credit bureaus and law enforcement agencies and I authorize them to release such information as you require, including my prior employment record, without any obligation to give me written notice of such disclosure. I also authorize you to release any information requested by any of my prospective or subsequent employers without any obligations to give me written notice of such disclosure.

I hereby release you and them from any liability whatsoever as a result of any such inquiries and disclosures. I agree that, if employed, any false statement, misrepresentation or material omission of information in support of my application will subject me to discharge at any time during the period of my employment.

Applicant's Signature

Date

EDUCATION RECORD

School	Name & Address of School	Describe Course Study	Circle Last Yr. Compl.	Did You Graduate?	Describe Diploma or Degree
High			1 2 3 4		
College or University			1 2 3 4		
College or University			1 2 3 4		
Graduate Work			1 2 3 4		

Describe subjects of greatest interest: _____

Honors, Awards, Scholarships received: _____

What was your grade average in High School? _____ College/University? _____ Trade/Professional/Other? _____

What were your greatest school achievements? _____

SUMMER OR PART-TIME JOBS WHILE IN HIGH SCHOOL AND/OR COLLEGE/UNIVERSITY:

Company and Location	Type Job	Earnings	Hours/Week

*Extracurricular activities while in high school and/or college/university: _____

*(exclude the name of any activity, organization, club or professional society of which you were involved and/or a member which by its name and character indicates the race, color, religion, sex, age or national origin of its membership)

*List professional, trade, business, or civic activities and offices that you have held: _____

*(exclude the name of any activity, organization, club or professional society of which you were involved and/or a member which by its name and character indicates the race, color, religion, sex, age or national origin of its membership)

Describe any specialized training or skills or experience or qualifications which would help you in the promotional retail business: _____

What course(s) or seminar(s) have you taken since leaving school:

Course or Seminar	Sponsored By

Do you plan to continue your education? _____ If so, when? _____

In what field? _____

Do you type? _____ Number of words per minute _____ Other office machines _____

List below all present and past employment, beginning with your most recent.

I.	Name & Address of Company and Type of Business	What was your title? Describe the work you did	Date of employment		Reason for Leaving	Name & Title & Phone No. of Supervisors
			Starting (mo.) (yr.)	Last (mo.) (yr.)		
			Rate of Earnings			
			Starting	Last		
	Telephone _____					
II.	Name & Address of Company and Type of Business	What was your title? Describe the work you did	Date of employment		Reason for Leaving	Name & Title & Phone No. of Supervisors
			Starting (mo.) (yr.)	Last (mo.) (yr.)		
			Rate of Earnings			
			Starting	Last		
	Telephone _____					
III.	Name & Address of Company and Type of Business	What was your title? Describe the work you did	Date of employment		Reason for Leaving	Name & Title & Phone No. of Supervisors
			Starting (mo.) (yr.)	Last (mo.) (yr.)		
			Rate of Earnings			
			Starting	Last		
	Telephone _____					
IV.	Name & Address of Company and Type of Business	What was your title? Describe the work you did	Date of employment		Reason for Leaving	Name & Title & Phone No. of Supervisors
			Starting (mo.) (yr.)	Last (mo.) (yr.)		
			Rate of Earnings			
			Starting	Last		
	Telephone _____					

May we contact the employers listed above? _____ If not, indicate which one(s) _____

Which jobs did you like best and why? _____

Which jobs did you like least and why? _____

What would you want from your next job that you are not getting now? _____

What kind of position would you like to hold in five years? _____

What are your strongest personal assets? _____

List the accomplishments you have achieved in business (use separate sheet if more space is needed): _____

PERSONAL REFERENCES

(prefer management people and business associates who you worked with or for, no relatives)

Name and Occupation	Address	Phone Number

* In consideration of my employment I agree to abide by all rules, regulations and policies of Allen's of Hastings, Inc. My employment is at will. My employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the company or myself.

* I further understand that no store manager or representative of Allen's of Hastings, Inc., other than the President, has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing.

* I have read the above application. I understand it, and do hereby voluntarily enter my signature below.

Applicant's Signature Date

* All employees of Allen's of Hastings have agreed to donate one cent per hour to charity. Please sign below authorizing this deduction from your wages, should you agree.

Applicant's Signature Date

* I understand that I may be asked to take a polygraph (lie detector) test in connection with specific investigations conducted by the Company. The results of that test may be considered along with other factors in determining whether my employment is terminated, but will not be the sole factor in determining whether my employment is terminated.

Applicant's Signature Date

* I hereby authorize Allen's of Hastings, Inc. to deduct from each paycheck (subject to wage and hour limitations) any amount necessary to offset any damages caused by me, or charges or loans owed by me to Allen's of Hastings, Inc. during the course of my employment.

Applicant's Signature Date

In case of emergency notify _____
(name) (address) Phone #

APPLICANT, PLEASE DO NOT WRITE BELOW THIS LINE --- FOR COMPANY USE ONLY

Interviewed by	Date	Excellent	Good	Fair	Poor	How interested in Allen's	Appearance & Neatness	Personality

Comments: _____

FOR MANAGER'S USE ONLY

Starting Date _____ Starting Salary \$ _____ Dept. _____

Employment approved by _____ Full-time _____ Part-time _____

Voluntary Applicant Data Record

Applications are considered for all positions and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital status, pregnancy, veteran status, sexual orientation, gender identity or disability.

Solely to help us comply with government record keeping and other legal requirements, you may voluntarily fill out the Voluntary Applicant Data Record. Failure to complete the Voluntary Applicant Data Record will have no effect on the application process. This information shall not be used in making any hiring decision or in any selection procedure and will be kept in a confidential file separate from the Application for Employment.

☐ Decline Voluntary Self Identification: I do not wish to self identify for any purpose.

Signature: _____

(Please Print)

Position Applied For: _____ Date: _____

Referral Source: ☐ Advertisement ☐ Friend _____
☐ Walk-In ☐ Employment Agency _____
☐ Relative _____ ☐ Other _____

Name: _____ Phone: (_____) _____
Last First Middle Area Code

Address: _____
Number Street City State Zip Code

Affirmative Action Survey

Government agencies require periodic reports on the sex, marital status, ethnicity, and age of applicants. This data is for analysis and Government reporting only.

(Check one) Gender: ☐ Male ☐ Female (Check one) Marital Status: ☐ Single ☐ Married ☐ Divorced

(Check one) Race/Ethnic Group: ☐ White ☐ Black ☐ Hispanic
☐ American Indian/Alaskan Native ☐ Asian/Pacific Islander

Complete the following: Date of Birth _____ Current Age _____