

CONFIDENTIAL



Moe Hardware & Sporting Goods Application for Employment

In order for your application to be evaluated, it is essential that all of the following questions be answered carefully, completely, and written legibly. (if we can't read it, it will be thrown away)

PERSONAL INFORMATION

POSITION DESIRED

LAST NAME FIRST NAME MIDDLE INITIAL

CURRENT ADDRESS _____
((NO P.O. BOX) STREET, CITY, STATE, ZIP CODE)

PHONE NUMBER _____ DATE AVAILABLE _____

SOCIAL SECURITY NO. _____ ARE YOU UNDER 18? _____

HOW REFERRED TO US? _____ SALARY EXPECTED _____
(Ad, friend agency – please name) (hourly or monthly)

EDUCATION

SCHOOL	NAME OF SCHOOL (Location)	MAJOR AREA OF STUDY	YEARS ATTENDED	GRADUATE (YES OR NO)	DEGREE

AVERAGE HIGH SCHOOL GRADES ____ COLLEGE GPA ____ BASED ON ____ POSSIBLE POINTS

HONORS AND ACTIVITIES

Employment History

(Start with your most recent position and attach another sheet if more space is needed to provide three years of employment history.)

1. COMPANY NAME, ADDRESS, PHONE NO. _____

SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

2. COMPANY NAME, ADDRESS, PHONE NO. _____

SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

3. COMPANY NAME, ADDRESS, PHONE NO. _____

SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

4. COMPANY NAME, ADDRESS, PHONE NO. _____

SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____

SALARY: START _____ END _____ POSITION _____

BRIEF DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

MEMBERSHIPS, INTERESTS, ACTIVITIES

(**NOTE:** EXCLUDE any memberships, interests, or activities of which the name or character of which relates to race, religion, national origin or any other protected category.)

REFERENCES

Give three references not related to you:

	<u>Name</u>	<u>Relation</u>	<u>Phone No.</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

WAREHOUSE AND OFFICE SKILLS

(Check all that apply)

<input type="checkbox"/> Shipping	<input type="checkbox"/> Customer Relations
<input type="checkbox"/> Receiving	<input type="checkbox"/> Calculator
<input type="checkbox"/> Fork Truck	<input type="checkbox"/> Computer
<input type="checkbox"/> Sales Experience. Years? _____	<input type="checkbox"/> Point of Sales System
Other (describe) _____	<input type="checkbox"/> Multi line phone system
	Other (describe) _____

GENERAL INFORMATION

Please note other facts or skills in your background that might be helpful in evaluating your qualifications: _____

Do you have any additional work which will continue if employed by us? _____

Have you previously applied for work with us? _____ When? _____

READ CAREFULLY BEFORE SIGNING

I certify that the answers I have given in this application are true and accurate to the best of my knowledge, and I understand that any false or misleading answers or any omission or concealment of facts will disqualify me from consideration for employment or will result in my immediate discharge.

In filling out this application for employment it is understood that an investigation may be made whereby information is obtained from former employers and others. I hereby authorize all former employers, educational institutions which I have attended, credit agencies and references, to give the company and its agents any and all information concerning my previous employment and any pertinent information that they may have (personal or otherwise). I hereby release all parties from all liability for any damage that may result from furnishing same to you. I understand that if such investigation should reveal a false statement or derogatory reports, I will be disqualified from employment or will be subsequently dismissed.

I agree to conform to the rules and regulations of the company and, if employed, I understand and agree that my employment is at will. I also understand and agree that my employment may be terminated at any time with or without cause. Any agreement contrary to the above must be in writing, must expressly state that it is a contract for specified term, and must be signed by the president of the company.

I am willing to take a pre-employment physical which DOES include drug/alcohol testing and agree that my initial or continued employment may be contingent on the results.

By placing my signature below, I certify and acknowledged that I have read the above, understand it, and agree to it.

Date

Signature of applicant

INTERVIEW COMMENTS

For office use only:

JOB TITLE _____ STARTING DATE _____

STARTING RATE _____ DEPARTMENT _____