

PLEASE PRINT

Date of Application _____ Position(s) Applied For _____

Name _____ Telephone _____
 Last First Middle Include Area Code

Address _____
 Number Street City State Zip Code

Email _____

Employment desired? ☐ Full Time ☐ Part Time How many hours can you work weekly? _____

Days / hours available to work: _____

On what date would you be available to start work? _____ Desired salary: _____ / hour

Provide additional info on availability, if needed:

EDUCATION

	High School				Business or Trade School				College/ University				Graduate/ Professional			
School Name																
Years Completed/ Degree	9	10	11	12	1	2	3	4	1	2	3	4	1	2	3	4
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diploma/Degree																
Describe other training, seminars, coursework, etc. that applies to the job.																

WORK EXPERIENCE

Please list your work experience for the past five years beginning with your most recent job held. If you were self-employed, give firm name. *Attach additional sheets if necessary.*

Employer:		Dates Employed	
Address:		From:	To:
Phone Number:			
Job Title:		Supervisor:	
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Employer:		Dates Employed	
Address:		From:	To:
Phone Number:			
Job Title:		Supervisor:	
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

WORK EXPERIENCE (continued)

Employer:		Dates Employed	
Address:		From:	To:
Phone Number:			
Job Title:		Supervisor:	
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Employer:		Dates Employed	
Address:		From:	To:
Phone Number:			
Job Title:		Supervisor:	
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

REFERENCES

Give name, address and telephone numbers of three references who are not related to you and are not previous employers.

1. Name: _____ Telephone: _____
Address: _____
Email: _____
2. Name: _____ Telephone: _____
Address: _____
Email: _____
3. Name: _____ Telephone: _____
Address: _____
Email: _____

ADDITIONAL INFORMATION

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Did you complete this application yourself?

☐ Yes ☐ No

If not, who did?

Are you able to perform the essential functions and duties of the job for which you are applying?

☐ Yes ☐ No

If not, please describe the functions or duties you are unable to perform.

Cloth Carousel is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 180 days. If I wish to be considered for employment beyond this time period, I understand that I need to inquire as to whether or not applications are being accepted at that time.

I understand that neither this document nor any offer of employment from the employer constitutes an employment contract unless a specific document to that effect is executed by the employer and me in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date