

Application for Employment

Today's Date:						
Last Name:	First:	Middle Initial:				
Street Address:						
City:	State:	Zip Code:				
Email:	Phone:					
•	rwise authorized to work in the United S ride documentation:	States on an unrestricted basis?				
What type of work are you looking for: ☐ Full Time ☐ Part Time How many hours per week:						
What days are you available to work:						
Employment Desired						
Position applied for:						
How did you hear of this opening?						
Have you ever applied for employment here: ☐ Yes ☐ No When?						
Are you presently employed: ☐ Yes ☐ No						
May we contact your present employer? ☐ Yes ☐ No						
Date you can start:						
Do you have any quilting/sewing experience ☐ Yes ☐ No						
Please Describe:						
Do you have any experience v	with Microsoft Office					
Please Describe:						
Do you have any sales experience ☐ Yes ☐ No						
Please Describe:						

Education School Name & Location Major Degree Year **High School** College Post College _____ Other: In addition to your work history, are there other skills, qualifications, or experiences that we should consider? **Employment History (start with most recent employer)** Company Name: Address:______Phone: _____ Date Started: _____ Starting Wage: ____ Starting Position: ____ Date ended: _____ Ending Wage: ____ Ending Position: ____ Name of Supervisor: ______ May we contact? \square Yes \square No Responsibilities: Reason For Leaving: Company Name: _____ Phone: Address:____ Date Started: _____ Starting Wage: ____ Starting Position: ____ Date ended: _____ Ending Wage: ____ Ending Position: ____ Name of Supervisor: _____ May we contact? ☐ Yes ☐ No Responsibilities:

Reason For Leaving:

Company Name:			
Address:			Phone:
Date Started:	Starting Wage:	Starting	g Position:
Date ended:	Ending Wage:	Ending P	osition:
Name of Supervisor: _			May we contact? ☐ Yes ☐ No
Responsibilities:			
Reason For Leaving:_			
References			
List three personal ref	erences, not related to you	ı, who have kno	wn you for more than one year
Name:		Phone:	Years Known:
Address:			
Name:		Phone:	Years Known:
Address:			
Name:		Phone:	Years Known:
Address:			
Any additional info	ormation that we shoul	d consider: _	
Please Read Before	e Signing:		
			is true and complete to the best of my rould alter the integrity of this
	ployment with this compary communication distribut		with all the rules and regulations as set yees.
can terminate the emp	ployment relationship at a ute. All employment is con	ny time, with or	h means that either I or this company without prior notice, and for any reason basis. I hereby acknowledge that I have
Signature:			Date: