



APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Please use an ink pen to complete the application in your own handwriting

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability, national origin, veteran status or any other characteristic protected under the law.

This application shall be considered active for a period not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should complete another application at the end of that period.

| | | |
|--|---------------------|--------------------------------------|
| Name (Last, First, Middle) | | Date of Application |
| If there is any other name other than the one stated above that would identify you to a previous employer or educational institution, please list. | | |
| Address (Street, City, State, Zip) | | Telephone Number with Area Code |
| E-mail Address | | Mobile/Beeper/Other Telephone Number |
| Position Applying for | | |
| Date Available | Salary Requirements | Social Security Number |
| Referred by: <input type="checkbox"/> Agency _____ <input type="checkbox"/> Walk-in <input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Friend _____ <input type="checkbox"/> Other (Check one) | | |

| <i>Please Check Yes Or No:</i> | Yes | No |
|--|---|---|
| Have you ever filed an application with us before? If yes, give date: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| If you are under 18 years of age, can you provide required proof of your eligibility to work? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever been employed with us before? If yes, when and where? _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you currently employed? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you currently on "lay-off" status and subject to recall? | <input type="checkbox"/> | <input type="checkbox"/> |
| Can you travel if a job requires it? | <input type="checkbox"/> | <input type="checkbox"/> |
| If applicable, are you willing to relocate? | <input type="checkbox"/> | <input type="checkbox"/> |
| Are any relatives or acquaintances employed with us? If yes, list: _____ | <input type="checkbox"/> | <input type="checkbox"/> |
| Are you able to meet the attendance requirements of the job? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you signed any non-competition or non-disclosure agreements for any prior employers? | <input type="checkbox"/> | <input type="checkbox"/> |
| Have you ever been discharged or been asked to resign from a job? | <input type="checkbox"/> | <input type="checkbox"/> |
| If so, please explain: _____ | | |
| Have you been convicted of a felony or misdemeanor within the last seven years? | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please provide dates and details: _____ | | |
| <i>Note: A conviction record is not an automatic bar to employment. Each case is considered in relation to the position applied for.</i> | | |
| Are you available to work: | <input type="checkbox"/> Full Time <input type="checkbox"/> Overtime | <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary |
| | If Applicable: Shift Preference | <input type="checkbox"/> Shift Work <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3 rd |

WORK EXPERIENCE (MOST RECENT)

| | | |
|-----------------------|-----------------------------|--|
| Name of Employer | Address of Employer | Date Employed From: To: |
| Telephone of Employer | Supervisor's Name and Title | Rate of Pay Start: Finish: |
| Position or Title | Description of Duties | |
| Reason for Leaving | | May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No |

PREVIOUS EMPLOYER

| | | |
|-----------------------|-----------------------------|--|
| Name of Employer | Address of Employer | Date Employed From: To: |
| Telephone of Employer | Supervisor's Name and Title | Rate of Pay Start: Finish: |
| Position or Title | Description of Duties | |
| Reason for Leaving | | May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No |

NEXT PREVIOUS EMPLOYER

| | | |
|-----------------------|-----------------------------|--|
| Name of Employer | Address of Employer | Date Employed From: To: |
| Telephone of Employer | Supervisor's Name and Title | Rate of Pay Start: Finish: |
| Position or Title | Description of Duties | |
| Reason for Leaving | | May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No |

NEXT PREVIOUS EMPLOYER

| | | |
|-----------------------|-----------------------------|--|
| Name of Employer | Address of Employer | Date Employed From: To: |
| Telephone of Employer | Supervisor's Name and Title | Rate of Pay Start: Finish: |
| Position or Title | Description of Duties | |
| Reason for Leaving | | May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No |

INTERVALS OF UNEMPLOYMENT

| | | |
|------|----|-------------|
| From | To | Explanation |
| From | To | Explanation |
| From | To | Explanation |

EDUCATIONAL HISTORY

| Name | Location | Course of Study | Graduate | Degree Received |
|-----------------|----------|-----------------|-----------|-----------------|
| High School/GED | | | Yes or No | |
| College | | | | |
| Other | | | | |

BUSINESS REFERENCES

| | | | |
|------|---------|---------|------------------|
| Name | Company | Address | Telephone Number |
| Name | Company | Address | Telephone Number |
| Name | Company | Address | Telephone Number |

MILITARY HISTORY

| | | |
|--------------------------------|-------------------|----------------|
| US Military Service | Branch of Service | Duties |
| From: To: | Rank at Discharge | Reserve Status |

SKILLS AND QUALIFICATIONS

Summarize any training skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

APPLICANT'S STATEMENT

1. I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application or in any interview is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by Heidi Christine's. Please note that all information is subject to verification.
2. I understand that a background check is a condition of employment. I authorize Heidi Christine's and/or its agents to investigate thoroughly all statements contained in my application or resume, and to conduct a thorough investigation of my personal and professional experience and background; including without limitation, a review of my criminal, credit, employment and all other records Heidi Christine's deems appropriate under the circumstances, and I authorize former employers and references to disclose any and all information in their possession regarding me in connection with an application for or retention of employment to the Company and/or its agent. In addition, I release the Company and/or its agents, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation.
3. *I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at-will" and without fixed term, and may be terminated at any time, with or without prior notice, at the option of either the Company or myself. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing by an authorized company official.*
4. I understand that employment is contingent upon my complying with the employment verification requirements of the Immigration Reform and Control Act.
5. I understand that Heidi Christine's does not unlawfully discriminate in employment and no questions on this application are to be used for the purpose of limiting or excluding any applicant from consideration of employment on a basis prohibited by applicable local, state or federal law.
6. I certify that I have read, or have had read to me, items, 1, 2, 3, 4, and 5 above. I understand the contents and hereby acknowledge receipt of this information.

APPLICATION IS NOT COMPLETE WITHOUT SIGNATURE.

Signature of Applicant

Date

We appreciate your interest and the time you have taken to complete this application. Thank You.

*Equal Employment Opportunity and
Drug-Free Workplace Employer*