



725 E. Eighth St.
 Traverse City, MI 49686
 T (231) 946-5620
 FAX (231) 946-1880

EMPLOYMENT APPLICATION

Please print. You must fully and accurately complete this application. Incomplete applications will not be considered.

Position(s) applying for _____ Date of application _____

Have you filed an application here before? Yes No If yes, give date _____

Name _____ Phone _____
 Last First Middle

Address _____
 Street City State Zip

Social Security Number _____ Are you 18 or older? Yes No

Are you legally eligible for employment in this country (A U.S. citizen or alien authorized to work in the U.S.)?
 Yes No

If necessary, best time to call you at home is: _____

Date available for work _____ Wage required _____

Type of employment desired:

Full-time Part-time Temporary/On call
 Number of Hours Desired per Week:

Check the days you would be able to work, and specify the times you would be available to work each day:

Monday Friday
 Tuesday Saturday
 Wednesday Sunday
 Thursday

Do you have any commitments to another employer that might affect your employment with us? Yes No

GENERAL INFORMATION

Have you ever been convicted of a crime, excluding misdemeanors and traffic violations? Yes No
 If yes, describe in full: _____

Have you ever been employed by this company before? Yes No If yes, give dates employed: _____

Are any of your relatives employed by this company? Yes No If yes, please list name(s), relationship, and store location:
 Name _____ Relationship _____ Location _____

EDUCATIONAL HISTORY

School	No. of Years Completed	Name and Location of School	Major Course of Study	Average Grades	Did you Graduate?
High School					
College or University					
Other					

What school activities and organizations including athletics did you participate in? (Please do not list those activities which would reflect race, color, religion, sex, national origin, disability, or ancestry.) _____

What scholastic honors did you receive? _____

U.S. MILITARY SERVICE

Branch of Service _____ From _____ To _____
 Describe any Special Training: _____

WORK HISTORY
GIVE PRESENT OR MOST RECENT POSITION FIRST

FIRM		PERIOD	POSITION HELD AND MAJOR DUTIES	IMMEDIATE SUPERVISOR & TITLE	REASON FOR LEAVING
NAME		FROM			
NUMBER & STREET		TO			
CITY & STATE		WEEKLY OR HOURLY RATE OF PAY *			
TYPE OF BUSINESS	PHONE				
NAME		FROM			
NUMBER & STREET		TO			
CITY & STATE		WEEKLY OR HOURLY RATE OF PAY *			
TYPE OF BUSINESS	PHONE				
NAME		FROM			
NUMBER & STREET		TO			
CITY & STATE		WEEKLY OR HOURLY RATE OF PAY *			
TYPE OF BUSINESS	PHONE				
NAME		FROM			
NUMBER & STREET		TO			
CITY & STATE		WEEKLY OR HOURLY RATE OF PAY *			
TYPE OF BUSINESS	PHONE				

* Applicant need not answer. Failure to do so will have no bearing on consideration for employment.

Have you ever been disciplined for absenteeism or tardiness? Yes No

Do we have permission to check all information? Yes No Can we contact your current employer? Yes No

What other special qualifications do you have not listed above? _____

List outside activities (please do not list activities that would reflect race, color, religion, sex, national origin, disability or ancestry) _____

Briefly state why you would like to work with our company: _____

We are an equal employment opportunity company. We are dedicated to a policy of non-discrimination in employment on any basis including race, creed, age, sex, religion, national origin, height, weight, marital status, or disability.

I understand that to be employed I must be lawfully authorized to work in the United States, and must show the employer documents that will prove this.

I understand that the company will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

All of the information on this application and made in conjunction with this application is correct and true to the best of my knowledge. I understand that any false or misleading statement made by me in connection with this application or the failure to disclose any material information will be grounds for dismissal. I understand that if hired I will have a probationary period during which time I may be terminated at the discretion of the company. Thereafter the terms of my continued employment will be pursuant to the written employment policies that the company may from time to time determine.

Signed _____

Date _____

This employment application will become inactive after 90 days. If you wish to be considered after that time, you must complete a new application. However, your application will be kept on file for 12 months.