

# Application For Employment

*We Are An Equal Opportunity Employer*

**Please Print**

Last Name	First Name	Middle Initial	Social Security Number
Address	City	Zip Code	Phone Number

## WORK EXPERIENCE - LIST MOST RECENT JOB FIRST

From	Employer's Name/Address/Telephone	Start Pay	Job Title
To		Last Pay	Reason for Leaving

Describe the Work You Did \_\_\_\_\_

From	Employer's Name/Address/Telephone	Start Pay	Job Title
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Describe the Work You Did \_\_\_\_\_

## GENERAL INFORMATION

What position are you applying for? \_\_\_\_\_ Full Time? [ ] Part Time? [ ]

When are you available to start work? \_\_\_\_\_ Are you willing to work overtime? Yes [ ] No [ ]

Are you at least 18 years old? Yes [ ] No [ ]

If not, can you provide a valid Work Permit, high school diploma, or equivalent? Yes [ ] No [ ]

What languages do you speak, read, or write fluently? \_\_\_\_\_

If hired, can you verify that you have the legal right to work in the United States? Yes [ ] No [ ]

Do you have any special skills, training, or experience which may help you qualify for this job? Yes [ ] No [ ]

If so, please explain \_\_\_\_\_

Do you have a reliable means of transportation to get to work? Yes [ ] No [ ]

Are there any times during the week that you are not available to work? Yes [ ] No [ ]

If so, please explain \_\_\_\_\_

Do any of your relatives work for this company? Yes [ ] No [ ] If so, who? \_\_\_\_\_

Have you ever worked for this company before? Yes [ ] No [ ] If so, when? \_\_\_\_\_

How did you find out about this job? \_\_\_\_\_

## CERTIFICATION AND ACKNOWLEDGMENT

I certify that the information provided herein is true and correct to the best of my knowledge. I understand that, if employed, falsified statements on this Application for Employment form will be considered grounds for termination.

I authorize the company to thoroughly investigate my work experience and any other matters related to my suitability for employment. I further authorize my former employers to disclose to the company any and all information they may have concerning my previous employment. In addition, I hereby release the company, my former employers, and all other persons from any and all claims, demands, or liabilities arising out of, or in any way related to, such disclosure.

I acknowledge that, if employed, both the company and I have the right to terminate the employment relationship at any time, with or without cause or advance notice. This employment at will relationship will remain in effect throughout my employment with the company and may not be modified by any oral or implied agreement.

Applicant's Signature	Date
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## Application for Employment Continued

Have you been sanctioned or disciplined by, or excluded from participating with, any government agency?  Yes  No

o If yes, please explain:

Have you ever been convicted of a crime? [ Note: Conviction will not necessarily disqualify applicant]  Yes  No

o If yes, please explain:

Have you been found to have committed abuse or neglect by a licensing or Government agency?  Yes  
 No

### Applicant's Statement & Acknowledgement

THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED.

Initial: \_\_\_\_ I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts calls for my result in refusal to hire, or if hired, may result in my dismissal at any time, regardless of when the false answer or omissions are discovered.

Initial: \_\_\_\_ I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Company, I will be an at-will associate, meaning that either the Company or I may end the employment relationship at any time with or without cause or notice.

Initial: \_\_\_\_ I further understand and agree that, except for employment-at-will status, if hired, my wages, hours, working conditions, job assignment(s) and compensation rate(s) will be subject to change by Towne Centre.

Initial: \_\_\_\_ I understand that if I am offered employment, I may be required to sign a non-solicitation and non-disclosure agreement, as a condition of the employment.

Initial: \_\_\_\_ I understand and expressly agree that if employed by Towne Centre, storage areas provided for me (locker, desk, etc.) are open to investigation by the Company without prior notice to me.

Note to Applicant: Smoking is prohibited in all indoor areas of Towne Centre unless designated smoking areas have been established by a particular office in accordance with applicable state and local laws.