## Application for Employment PRE-EMPLOYMENT QUESTIONNAIRE EQUAL OPPORTUNITY EMPLOYER

|   | 711                  | DATE                                    |   |  |                     |  |
|---|----------------------|---|---|--|---------------------|--|
| NAME (LAST NAME FIRST)                          |                      |   |   | SOCIAL SECURITY NO.  |                     |  |
| RESENT ADDRESS                                  |                      | CITY                                    |   | STATE  | ZIP CODE            |  |
| ERMANENT ADDRESS                                |                      | CITY                                    | *************************************** | STATE  | ZIP CODE            |  |
| PHONE NO.                                       | SECONDARY            | PHONE NO.                               | at Windows Committee                    | REFERRED BY  |                     |  |
|   |                      |   |   | -  |                     |  |
| ducation History                                |                      |   | THE RESIDENCE OF THE PERSON NAMED IN    | CANADA SERVICE DE LA CANADA DELIGIA DE LA CANADA DELIGIA DE LA CANADA DELIGIA DE LA CANADA DELIGIA DE LA CANADA DE LA CANADA DE LA CANADA DELIGIA DELIG |                     |  |
|   | NAME & LOCATION OF S | SCHOOL                                  | YEARS<br>ATTENDED                       | DID YOU<br>GRADUATE  | SUBJECTS STUDIED    |  |
| HIGH SCHOOL                                     |                      |   |   |  |                     |  |
| COLLEGE   |                      |   |   |  | ř                   |  |
| FRADE, BUSINESS, OR<br>CORRESPONDENCE<br>SCHOOL | 6                    |   |   |  |                     |  |
|   |                      | • | •                                       |  |                     |  |
| Desired position                                | ☐ Seamstre           | ess Assistant                           |   | 0 9  | Sales Consultant    |  |
| Desired Salary                                  |                      |   |   | 36   |                     |  |
| Have your ever a                                | any before?          |   | Yes                                     | □ No   |                     |  |
| If so whon?                                     |                      |   |   |  |                     |  |
|   |                      |   |   | 7 V.   | T No.               |  |
| Have you ever w                                 | orked for this comp  | any before?                             |   | ☐ Yes  | □No                 |  |
| If so when?                                     |                      |   |   |  |                     |  |
| Are you currentl                                | Yes                  |   | □ No                                    |  |                     |  |
| If so, may we inquire of your present emp       |                      |   |   | Yes  | □No                 |  |
| Date available to                               | start                |   |   | -  |                     |  |
| Days/Hours Avai                                 | lable to Work (pleas | se write dow                            | n the ti                                | mes you are  | available to work.) |  |
| No Preference_                                  |                      |   | Thurs                                   |  |                     |  |
| Monday  |                      | Friday                                  |   |  |                     |  |
| Tuesday Satur                                   |                      |   | Saturday                                | /  |                     |  |
| Wednesday                                       |                      |   |   |  |                     |  |
| Special Notes                                   |                      |   |   |  |                     |  |

| Have you ever  | worked in retail before  | e?   | Yes  | ☐ No   |  |
|--|--|--|--|--|--|
| Do you have experience in sewing or alterations?   |  |  | Yes  | ☑ No   |  |
| If so please exp   | olain  |  |  |  |  |
| General Information  | on   |  |  |  |  |
| SUBJECT OF SPECIAL<br>STUDY/RESEARCH WORK  |  |  | threat and   |  |  |
| SPECIAL TRAINING   |  |  |  |  |  |
| SPECIAL SKILLS   |  |  |  |  |  |
| U.S. MILITARY OR<br>NAVAL SERVICE  |  |  | RANK   |  |  |
| References (plea   | ase list 4 references be   | elow that you hav  | ve known for a year o  | r longer.)   |  |
| Name   | Phone Number   | Occupation   | Relation to you  | Years known  |  |
|  |  |  |  |  |  |
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| thorization  |  |  |  |  |  |
| certify that the facts contained sified statements on this application of all statements on the application of all statements on the application concerning my previous mpany from all liability for any all so understand and agree that ecified period of time, or to maderesentative. | cation shall be grounds for dis<br>atements contained herein ar<br>us employment and any perti<br>damage that may result from<br>no representative of the comp | emissal.  Ind the references and nent information they utilization of such informany has any authority | employers listed above to g<br>may have, personal or other<br>mation.<br>to enter into any agreement t | ive you any and all ir wise, and release the for employment for an |  |
| s waiver does not permit the a sabilities Act (ADA) and other a  | relevant federal and state law   | S.   |  |  |  |
| nderstand that a consumer conjuired, I understand that, in conjurts and will also obtain a settory or conviction will not auto   | ompliance with federal law, the parate written authorization f   | e company will provide<br>rom me to consent to   | me with a written notice regathese reports. I also unders  | arding the use of thes   |  |
| compliance with federal law, a te the required employment e  | Il persons hired will be require   | ed to verify identity and  |  | ted States and to con  |  |
|  |  |  |  | <u> </u>   |  |
| TE   | SIGNATURE  |  |  |  |  |
| ,  | Do Not Wri   | te Below This Lin  | <i>(e</i>  |  |  |
| TE   | INTERVIEWED BY   |  |  |  |  |