



APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

PERSONAL INFORMATION

Date: _____

Name: _____
Last First Middle Maiden

Present address _____
Number Street City

State Zip Apt #
How Long _____

Phone number _____

Are you over 18 years old? __ Yes __ No
If you are under the age of 18, Can you supply working papers? __ Yes __ No

Position applied for _____ Full time __ Part time

Date Available _____ Salary Desired _____

Are you legally eligible for employment in the United States? __ Yes __ No
(If offered employment, you will be required to provide documentation to verify eligibility.)

Do you have a Driver's License? __ Yes __ No Driver License Number _____
State of Issue _____ Expiration Date _____

Have you ever been convicted of a felony or misdemeanor which resulted in
imprisonment within the last seven years? __ Yes __ No

If yes, please explain _____

(A conviction will not necessarily result in the denial of employment)

EDUCATION HISTORY

	School Name	City/State	Years completed	Diploma/ Degree	Major course(s)
High School				YES No	
Technical School				YES No	
College				YES No	
Other				YES No	

EMPLOYMENT: List last employer first, including U.S. Military service.

May we contact your present employer? __ Yes __ No

Employer Name _____ Telephone _____

Address _____

Position _____ Dates of employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Reason for Leaving _____

Employer Name _____ Telephone _____

Address _____

Position _____ Dates of employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Reason for Leaving _____

Employment continued.

Employer Name _____ Telephone _____

Address _____

Position _____ Dates of employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Reason for Leaving _____

Employer Name _____ Telephone _____

Address _____

Position _____ Dates of employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Reason for Leaving _____

Please explain any gaps in work history: _____

REFERENCES:

Professional

Personal

Name _____ Name _____

Phone (_____) _____ Phone (_____) _____

Title _____ Relationship _____

References Continued:

Professional	Personal
Name _____	Name _____
Phone (____) _____	Phone (____) _____
Title _____	Relationship _____

Name _____	Name _____
Phone (____) _____	Phone (____) _____
Title _____	Relationship _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Top-Shelf Fixtures to verify their accuracy and to obtain reference information on my work performance. I hereby release Top-Shelf Fixtures from any/all liability of whatever kind of nature which, at any time, could result from obtaining and having an employment decision based on such employment.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the employer. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant: _____ Date: _____