

SUPER SHOES

APPLICATION FOR EMPLOYMENT

Super Shoe Stores is an equal opportunity employer. All applicants are considered for employment based upon their skills and previous performance without regard to race, color, religion, sex, national origin, age, ancestry, handicap, or marital status.

Today's Date:

Name		Home Telephone ()	
Address	City	State	Zip Code

Position Desired	Salary Desired	Date Available	Preference of Location (if any)
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Type of Employment Sought <input type="checkbox"/> Permanent <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part-Time	Check Your Availability for Work on a Regular Basis:																												
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How were you referred to Super Shoes?

Ad
 Employment Agency
 Other – Please Identify Source

Have you ever been employed by Super Shoes? Yes No

If Yes, Please Explain:

Do you have any relatives employed at Super Shoes? Yes No

If Yes, Please Explain:

Are you a U.S. Citizen?	If No, Visa Type and Number
<input type="checkbox"/> Yes <input type="checkbox"/> No	

Do you have any physical, mental, or medical condition(s) which would in any way limit or interfere with your ability to perform the job for which you are applying? Yes No

If Yes, Explain:

Have you ever been convicted of a felony? Yes No

If Yes, Please Explain Offense and Final Disposition:

Please Indicate Office Skills (If Applicable):

EDUCATION

School Name and Address	Major Area of Study	Number of Years Completed	Degree or Certificate
High School			
College			
Graduate			
Other			

Include U.S. Military Service. Account for all (or any) periods of unemployment.
List present or most recent employer first.

EMPLOYMENT HISTORY

Company		Type of Business		Dates Employed _____ to _____	
Location Worked:				Telephone (____) (____)	
Position Start	Salary Start	Supervisor Name		May be Contacted Now?	
Present	Present	Title		<input type="checkbox"/> Yes	
Responsibilities					
Reason for Leaving					

Company		Type of Business		Dates Employed _____ to _____	
Location Worked:				Telephone (____) (____)	
Position Start	Salary Start	Supervisor Name		May be Contacted Now?	
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Present	Present	Title		<input type="checkbox"/> Yes	
Responsibilities					
Reason for Leaving					

OTHER EMPLOYMENT Account for 10 years prior to present employment or all time since leaving school

Dates	Title	Company	Responsibilities

STATEMENT OF ACCURACY READ CAREFULLY BEFORE SIGNING

To the best of my knowledge, all information provided in this application is complete and accurate. I realize that falsification and/or incomplete information will constitute sufficient cause for Super Shoes not to employ me, or if employed, to terminate my employment for cause. I authorize past employers, any law enforcement organization or educational institution to give information to Super Shoes concerning my background.

Signature _____ Date _____

PERSONNEL DEPARTMENT ONLY

Position _____ Store Number _____ Store City _____
Start Date _____ Salary _____ Supervisor's Signature _____