



# MY KID'S CLOSET

Employment Application

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Desired Salary	Location Applied for:		
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	
				NO <input type="checkbox"/>	
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	

EDUCATION			
High School		Address	
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>
College		Address	
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Other		Address	
From	To	Did you graduate?	Degree
		YES <input type="checkbox"/>	NO <input type="checkbox"/>

PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone ( )	
Address		Supervisor	
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

REFERENCES
<i>Please list three professional references.</i>

Full Name		Relationship				
Company		Phone (     )				
Address						
Full Name		Relationship				
Company		Phone (     )				
Address						
Full Name		Relationship				
Company		Phone (     )				
Address						
<b>MILITARY SERVICE</b>						
Branch		From	To			
Rank at Discharge		Type of Discharge				
If other than honorable, explain						
<b>AVAILIBITY</b>						
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
to:	to:	to:	to:	to:	to:	to:
<b>TELL US WHY YOU SHOULD BE CONSIDERED:</b>						
<b>DISCLAIMER AND SIGNATURE</b>						
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
Signature					Date	