

Application for Employment

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Last Name **First Name** **Middle Name**

Permanent Address **City** **State** **Zip Code**

Telephone Number **Email** **Date of Birth**

Are you currently employed ? Yes No May we contact your most recent employer(s)? Yes No

Can you submit verification of your legal right to work in the US ? Yes No
Proof of citizenship or immigration status will be required upon employment

Are you able to work flexible work schedules as needed? Yes No

Do you currently have any pending charges against you, or have you ever been convicted of, pleaded guilty or no contest to, been placed on probation, fined, imprisoned, or paroled for any offence, other than minor traffic violations ? Yes No
A pending charge or conviction will not automatically disqualify an applicant from employment.

If yes, please explain with details of the crime, conviction date, county and state it occurred and the circumstances.

Job Skills (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Lift up to 50lbs | <input type="checkbox"/> Familiar with point of sales systems (POS) |
| <input type="checkbox"/> Retail experience | <input type="checkbox"/> Take receipt, stack, rotate, front and inventory products |
| <input type="checkbox"/> Enter invoices | <input type="checkbox"/> Cash handling |

Position Desired **Date You Can Start** **Hourly Wage Desired**

Hours You Are Available To Work

Monday	Friday
Tuesday	Saturday
Wednesday	Sunday
Thursday	

Other Qualifications (Summarize any job related skills and qualifications acquired from past employment or any other experience you feel may be helpful when considering your application.)

Education

Highest grade level of education earned. _____

Degree	School Name	City/State	Years Attended

Employment History (Start with your present or last job. Include any job related military assignments)

Employer	Date Employed		
	From	To	
Address			
Permanent Address			
Telephone Number			
Job Title	Start	End	
Reason for leaving			
Employer	Date Employed		
	From	To	
Address			
Telephone Number			
Job Title	Start	End	
Reason for leaving			
Employer	Date Employed		
	From	To	
Address			
Telephone Number			
Job Title	Start	End	
Reason for leaving			

References

Give the names of three business references, not related to you, whom you have known for at least 6 months.

Name	Company Name	Phone Number	Relationship

Release Authorization I certify the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize and request my former employers, references, educational institutions, and credit agencies or reporting services which have information about me, to give City View Liquor, any and all information and opinions about me in their possession and I release them from any liability or claim relating to such release of information and opinions. I also authorize and request federal, state, and local governmental agencies, including probation officers, to release to City View Liquor any information requested concerning any criminal convictions on my record. A photo copy or fax of this signed authorization and waiver shall be valid as an original.

Print Name	Signature	Date
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