

Lil' Sneakers University

Application for Employment

Personal Information

Name: _____
Last First Middle Initial

Address: _____
Street

City State Zip Code

Telephone: _____
(Area Code) Number Alternate Number

Date of Birth _____

Social Security Number: _____ E-mail address _____

Please Circle:

Have you ever worked under another name? Yes No If yes, please identify: _____

Do you have a High School Diploma? Yes No

Are you at least 18 years of age? Yes No

Your Job Interest

Position Desired: _____ Date you can start work? _____

What starting wage do you expect? _____/hour

Are you available to work full time? Yes No

Are you willing to work any shift? Yes No If no, hour available: _____

Are there any days of the week when you would not be available?

Specify: _____

How did you learn of this job opening? _____

Have you ever worked for this company before? Yes No

If yes, when and reason for leaving: _____

Do you know anyone who works for Lil' Sneakers University? Yes No

Name: _____ Relationship: _____

Your Education and Training

Please circle the highest grade completed:

1 2 3 4 5 6 7 8

9 10 11 12

1 2 3 4 5

1 2 3 4 5

Grade School

High School

College

Trade School

What was the last school you attended? _____

List any skills that you have acquired that would be helpful for the job in which you are applying for:

Are you certified in: CPR__ First Aid__ Child Abuse__ Comm Disease__

Your Work Experience

Beginning with your present employer, describe your employment experiences.

Are you presently employed? Yes No

Are you on layoff and subject to recall? Yes No If yes, where? _____

Present of Last Employer: _____

Address: _____

Type of Business: _____

Dates Employed: _____ to _____

Starting Position: _____ Pay rate: _____

Final Position: _____ Pay rate: _____

Reason for Leaving: _____

Name of Supervisor: _____ Title: _____

Phone Number of Previous Employer: _____

Will you receive a satisfactory reference form this employer? Yes No

If No, please explain: _____

May we contact your present employer at this time? Yes No

If No, please explain: _____

Next Previous Employer: _____

Address: _____

Type of Business: _____

Dates Employed: _____ to _____

Starting Position : _____ Pay rate: _____

Final Position: _____ Pay rate: _____

Reason for Leaving: _____

Name of Supervisor: _____ Title: _____

Phone Number of Previous Employer: _____

Will you receive a satisfactory reference form this employer? Yes No

If No, please explain: _____

May we contact your present employer at this time? Yes No

If No, please explain: _____

Next Previous Employer: _____
Address: _____
Type of Business: _____
Dates Employed: _____ to _____
Starting Position : _____ Pay rate: _____
Final Position: _____ Pay rate: _____
Reason for Leaving: _____
Name of Supervisor: _____ Title: _____
Phone Number of Previous Employer: _____
Will you receive a satisfactory reference form this employer? Yes No
If No, please explain: _____
May we contact your present employer at this time? Yes No
If No, please explain: _____

Personal Information

Are you a U.S. citizen? Yes No If no, please complete next question.
Do you have or have you applied for the legal right to work and remain permanently in the United States? Yes No

Have you every been discharged or asked to resign by an employer? Yes No
If Yes, please explain:

Have you ever been convicted of a crime, other than a minor traffic violation? Yes No
If Yes, please explain:

Please complete this section if the job for which you are applying might require you to drive a company vehicle.

Do you have a valid driver's license? Yes No
State of origin: _____ License Number: _____
Have you had any accidents in the last five years? Yes No
If Yes, please explain:

Has your driver's license ever been suspended, revoked, denied, or canceled? Yes No
If Yes, please explain:

Your References

List the names of any professional or personal character references. A reference should be someone who has known you for the last three years and from whom you can obtain letters of recommendation. Please do not list relatives.

Name: _____

Address: _____

Phone #: _____

Relationship to Applicant: _____

Name: _____

Address: _____

Phone #: _____

Relationship to Applicant: _____

Name: _____

Address: _____

Phone #: _____

Relationship to Applicant: _____

Please read the following paragraphs carefully

By signing below, I certify that have read, understand, and agree to each of the following statements.

All of the information I have supplied on this application is true, accurate, and complete to the best of my knowledge. I have not knowingly withheld any information which, if know to the Company would affect my application unfavorably.

If I am hired by the Company, and if the Company discover at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

This employment application will be considered active for ninety (90) days for the date below. If I want to be considered for a job with the Company after this period of time, I must fill out another application.

I agree to submit to a medical examination which may include testing for drugs or alcohol prior to beginning work for the company. I understand that I f I am employed by the Company, I may be required when job related and consisting with the Company's business needs, to undergo a medial examination or testing for alcohol. I further understand that I may be required to submit to a test for the use of illegal drugs at any time.

In consideration of my employment with the Company, I agree to abide by all the Company's rules and regulations. _____ Date _____