G|F gallery furniture

EMPLOYMENT APPLICATION

CRITERIA: To be hired by this company you must be qualified and able to do all essential functions of the job; references and job history must be verifiable; you must be truthful on the application and during interviews; and you must be able to meet all selection standards mandated by law.

NAME:	I	DATE:		
ADDRESS:		PHONE:		
CITY:	STATE: 2	ZIP:		
E-MAIL ADDF	RESS:			
POSITION DE	SIRED:	FULL OR PART TIME:		
[]Yes []No []Yes []No []Yes []No []Yes []No []Yes []No	Did you complete High School? If no Did you complete College? If yes, fiel Are you attending school now? If yes	ld:		
[]Yes []No []Yes []No []Yes []No []Yes []No []Yes []No []Yes []No []Yes []No []Yes []No	 Can you provide proof of legal right to work in this country? Do you speak English? Do you speak other languages? If yes, which ones: Can you work in a non smoking environment? Can you work all weekends (both days), evenings and holidays? If no, any special request of day not able to work: Are you willing to undergo a drug screening? 			
[]Yes []No []Yes []No	Have you ever worked for this company before? Have you made application to this company before? If yes, when: Are you related to an employee of this company? If yes, who: Do you know any employees of this company? If yes, who: Have you ever been convicted of a criminal offense? If yes, list year and charge of offense: Have you ever pled guilty or nolo contender (no contest) to a criminal charge in order to			
[]Yes []No	qualify for deferred adjudication? If yes, give details: Have you ever been on any type of probation as a result of a criminal charge? If yes, give details: List any DWI or DUI charges / prosecutions/ probations:			
[]Yes []No []Yes []No		violations in the past 3 years? If yes, explain:		
[]Yes []No []Yes []No	Have you had a defensive driving clas Have you had any vehicular accident	s in the past 3 years? If yes, #: s in the past 3 years? If yes, list each:		

BIOGRAPHICAL DATA

GALLERY FURNITURE

PLEASE READ! As part of your background investigation, you must complete this form for the last *SEVEN YEARS* for both your residences and your past employment. If you need an additional sheet, please ask. PLEASE PRINT CLEARLY IN BLACK INK ! Illegible handwriting will only slow the process. The request for Date of Birth is for permissible purpose and not for purposes prescribed by the law prohibiting age discrimination. The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age. It is unlawful for an employer to refuse to hire; discharge; or otherwise discriminate with respect to compensation, terms, conditions, or privileges of employment because of an individual' age.

NAME:				ALIAS	S(S):			
PHONE:				CELL	_ CELL:			
Have you ever j	pled guilty, no conte	est, been given defe	erred adjudica	tion, or been found	guilty of a crime	e?	Yes 🗆	No 🗆
CITY:		_ COUNTY: _		STATE	3:	YEAR:		
			RESIDEN	CES (Starting w	rith current)			
ADDRESS: _	STREET	APT	CITY	STATE	ZIP	HOW LONG?		
ADDRESS: _		APT	CITY	STATE		HOW LONG?		
ADDRESS: _						HOW LONG?		
ADDRESS: _	STREET STREET	APT APT	CITY	STATE	ZIP	HOW LONG?		
				EDUCATION				
HIGH SCHOO	L:				LAS	T YEAR ATTENDED:		
СІТҮ:		STATE:	PH	IONE:		_ GRADUATED 🗆	DID NOT GRADUA	ATE 🗆
VOCATIONAL	./ TECHNICAL SC	THOOL:			LAS	T YEAR ATTENDED:		
CITY:		STATE:	РН	IONE:		_ GRADUATED □	DID NOT GRADUA	ATE 🗆
COLLEGE:					LAS	T YEAR ATTENDED:		
CITY:		STATE:	PH	IONE:		_ GRADUATED □	DID NOT GRADUA	ATE 🗆
GRADUATE S	CHOOL:				LAS	T YEAR ATTENDED:		
СІТҮ:		STATE:	РН	IONE:		_ GRADUATED □	DID NOT GRADUA	ATE 🗆
						MASTERS D PI	HD 🗆 BOTH 🗆	

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AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of Gallery Furniture to provide employment opportunities without regard to race, color, religion, sex, national originage, handicap, or veteran status.

FORMER EMPLOYERS BEGIN WITH YOUR PRESENT OR LAST EMPLOYER

Company:	Employed from:	to:	
Address:	City: S	State:	Zip:
Last position title:	Salary; starting:	ene	ding:
Reason for leaving:	Hours worked / week		
Immediate supervisor:	Phone #:		
Duties, responsibilities and number you supervised:			
Company:	Employed from:		to:
Address:	City: S	State:	Zip:
Last position title:	Salary; starting:	ene	ding:
Reason for leaving:	Hours worked / week		
Immediate supervisor:	Phone #:		
Duties, responsibilities and number you supervised:			
Commence	Employed for my		4
	Employed from:		
Address:	City: S	State:	Zıp:

company.	
Address:	City: State: Zip:
	Salary; starting: ending:
Reason for leaving:	Hours worked / week:
Immediate supervisor:	Phone #:
Duties, responsibilities and number you supervised:	

APPLICANT'S AGREEMENT

I UNDERSTAND AND AGREE THAT:

- 1. If I misrepresent or deliberately leave out a fact in my application, I may be refused employment or, if employed, I may be terminated.
- 2. If employed, I may terminate my employment at any time without notice or cause. I understand that my employment is for no definite period of time, and if terminated, Gallery is liable on for wages or salary earned as of the date of termination.
- **3.** I have read and agree to the above. I hereby certify that the facts I have provided in this application are true and complete.

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REFERENCES

List four (4) references who can attest to your work ethic and/ or job performance, skills and abilities. Unless you have worked for them as an employee, do not use friends or family members as references.

1.	Name:
	Organization/Company:
	Phone Number:
	Title:
	Address:
	E-mail (optional):
2.	Name:
	Organization/Company:
	Phone Number:
	Title:
	Address:
	E-mail (optional):
3.	Name:
	Organization/Company:
	Phone Number:
	Title:
	Address:
	E-mail (optional):
4.	Name:
	Organization/Company:
	Phone Number:

Title:	 	
Address:		
E-mail (optional):	 	