



# APPLICATION FOR EMPLOYMENT

(AN EQUAL OPPORTUNITY EMPLOYER)

**(PLEASE PRINT)**

DATE: \_\_\_\_\_ SOCIAL SECURITY #: \_\_\_\_\_

NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_ CELL#: \_\_\_\_\_

ARE YOU 18 YEARS OR OLDER? YES NO

ARE YOU ELIGIBLE TO WORK IN THIS COUNTRY? YES NO

**EMPLOYMENT DESIRED**

POSITION APPLYING FOR: \_\_\_\_\_ WAGE DESIRED: \$ \_\_\_\_\_

DATE YOU CAN START: \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

STORE APPLYING FOR: \_\_\_\_\_

EDUCATION	NAME & LOCATION OF SCHOOL	DID YOU GRADUATE?
HIGH SCHOOL	_____	_____
COLLEGE	_____	_____
TRADE OR BUSINESS SCHOOL	_____	_____

**FORMER EMPLOYERS** (LIST YOUR LAST THREE EMPLOYERS, STARTING WITH THE MOST CURRENT)

NAME	FROM/TO	WAGE	POSITION	REASON FOR LEAVING
1) _____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____

**PERSONAL REFERENCES** (LIST THREE PERSONS NOT RELATED TO YOU THAT YOU HAVE KNOWN AT LEAST ONE YEAR)

NAME	PHONE NUMBER	YEARS KNOWN
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____

<b>EMERGENCY CONTACT</b>		
NAME	HOME#	CELL#

**PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY AND INDICATE YOUR UNDERSTANDING AND ACCEPTANCE BY SIGNING IN THE SPACE PROVIDED.**

<p>1) I CERTIFY THAT ALL THE INFORMATION PROVIDED BY ME IN CONNECTION WITH MY APPLICATION, WHETHER ON THIS DOCUMENT OR NOT, IS TRUE AND COMPLETE, AND I UNDERSTAND THAT ANY MISSTATEMENT, FALSIFICATION, OR OMISSION OF INFORMATION MAY BE GROUNDS FOR REFUSAL TO HIRE OR, IF HIRED, TERMINATION.</p> <p>2) I UNDERSTAND THAT AS A CONDITION OF EMPLOYMENT, I WILL BE REQUIRED TO PROVIDE LEGAL PROOF OF AUTHORIZATION TO WORK IN THE UNITED STATES.</p> <p>3) I AUTHORIZE ANY OF THE PERSONS OR ORGANIZATIONS REFERENCED IN THIS APPLICATION TO GIVE GRUMPS, LTD. ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT, EDUCATION, OR ANY OTHER INFORMATION THEY MIGHT HAVE, PERSONAL OR OTHERWISE, WITH REGARD TO ANY OF THE SUBJECTS COVERED BY THIS APPLICATION, AND I RELEASE ALL SUCH PARTIES FROM ALL LIABILITY FROM ANY DAMAGES WHICH MAY RESULT FROM FURNISHING SUCH INFORMATION TO YOU.</p> <p>4) IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE POLICIES AND PROCEDURES OF GRUMPS, LTD.</p> <p>5) I UNDERSTAND THAT FOR CERTAIN POSITIONS, I MUST ACQUIRE CERTIFICATION BY THE TABC, AND THAT CERTIFICATION WILL BE AT MY OWN EXPENSE.</p>	
_____ <b>SIGNATURE</b>	_____ <b>DATE</b>

<b>HIRED: YES NO</b>	<b>POSITION:</b> _____	<b>WAGE: \$</b> _____
<b>DATE TO START:</b> _____		

