



EMPLOYMENT APPLICATION
An Equal Opportunity Employer

Please type or print in ink all required information. (Incomplete, illegible or **unsigned** applications may be eliminated from consideration.)

Job Title applying for: _____

Name: _____
Last First Middle

Social Security Number: _____

Mailing Address: _____
Number and Street Apt. No.

Home Phone: _____

_____ City State Zip

Work/Message Phone: _____

Email Address: _____

Cellular Phone: _____

Emergency Contact: _____

Phone: _____

GENERAL INFORMATION

Yes No Would you accept temporary employment? Yes No Are you at least 18 years of age?

Yes No If hired, can you provide proof of your legal right to work in the United States?

Yes No If hired, are you able to work weekends, holidays and overtime if necessary?

Yes No If hired, can you provide proof of possession of a valid Driver's License?

If yes, give license number and state. _____

Yes No Have you ever been convicted of a misdemeanor or a felony? If yes, list offense, date, location and penalty.

A conviction is not an automatic bar to employment

Yes No Have you ever been discharged from employment or been forced to resign? If yes, give details.

EDUCATION AND TRAINING

	School Name City and State	Degree Received
High School/GED		
College		
Technical/Business College		
Other (specify)		

EMPLOYMENT HISTORY

Starting with your most recent employer or volunteer experience, list all jobs and activities including military service, part-time employment and self-employment. Attach additional sheets if necessary. Resumes will not be accepted in lieu of completing this section of the application.

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

A	From		To		Present or Last Employer and Address:	Salary
	Month	Year	Month	Year		
	Supervisor's Name, Title and Telephone:				Reason for Leaving:	
Job Title and Duties:						
B	From		To		Present or Last Employer and Address:	Salary
	Month	Year	Month	Year		
	Supervisor's Name, Title and Telephone:				Reason for Leaving:	
Job Title and Duties:						
C	From		To		Present or Last Employer and Address:	Salary
	Month	Year	Month	Year		
	Supervisor's Name, Title and Telephone:				Reason for Leaving:	
Job Title and Duties:						

READ THIS STATEMENT BEFORE SIGNING

All information and answers to questions on this application are complete, true and correct to the best of my knowledge and belief. I understand that any misrepresentation, falsification, or omission of any facts may render this application void and may result in my termination without liability whenever discovered. I understand and agree that any dishonesty or falsification by me during my employment may result in immediate termination.

I authorize Hobby-Lobby International to conduct any investigation it deems appropriate concerning my application. I hereby authorize and request former employers, personal references, schools, and all other persons and organizations to disclose any information that may be sought in connection with this application. In return for their providing such information to Hobby-Lobby International or its agent, I hereby release all former employers, personal references, schools, and other persons and organizations from all liability in connection with those disclosures.

I understand and agree that any employment that may result from this application will be for no definite period or duration and may be terminated at any time without notice or cause at the option of either the company or me. If employed, I agree to acquaint myself with and to abide by any rules, regulations, instructions, policies and procedures of Hobby-Lobby International. I acknowledge and agree that Hobby-Lobby International has the absolute right to change its policies, procedures, and business practices and arrangements unilaterally, at any time, without prior notice.

I have read the above statements, I understand them, and agree to them.

Signature: _____ Date: _____

This original, signed application must be returned to Human Resources.