

## The Carpet Shoppe, Inc. Application for Employment

The following information is requested in order to help us make the best possible placement within the Company. All portions of this application pertaining to you must be completed. The Company, in accordance with State and Federal laws, does not discriminate on the basis of age, race, religion, sex, national origin, marital status, physical or mental handicap or arrest record.

### PERSONAL INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Pgr \_\_\_\_\_ Bus. Phone \_\_\_\_\_

Person to contact if we are unable to reach you \_\_\_\_\_ Phone \_\_\_\_\_

Have you ever been employed by this company before?

YES  NO If yes, when \_\_\_\_\_

Have you ever applied to this company before?

YES  NO If yes, when \_\_\_\_\_

Do you know anyone presently working for this company?

YES  NO If yes, whom \_\_\_\_\_

Were you referred to this company by anyone?

YES  NO If yes, whom \_\_\_\_\_

### EMPLOYMENT DESIRED

Position Desired \_\_\_\_\_  Full Time  Part Time Salary Desired \_\_\_\_\_

Date you can start \_\_\_\_\_ Days & hours available to work \_\_\_\_\_

### EDUCATION

	Name of School	Location	Years Completed	Did you graduate?	Degree(s)
High School					
College					
Other (Trade School, etc.)					

Special skills/qualifications applicable to the position for which you are applying \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES (Not Relatives)**

Name	Address	Phone	Occupation	Years Acquainted

**EMPLOYMENT RECORD (List last 3 employers starting with your present or most recent employment)**

1) Name of employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Type of business \_\_\_\_\_  
 Name of immediate supervisor \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Date Started \_\_\_\_\_ Date Left \_\_\_\_\_  
 Reason(s) for leaving \_\_\_\_\_

2) Name of employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Type of business \_\_\_\_\_  
 Name of immediate supervisor \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Date Started \_\_\_\_\_ Date Left \_\_\_\_\_  
 Reason(s) for leaving \_\_\_\_\_

3) Name of employer \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_ Type of business \_\_\_\_\_  
 Name of immediate supervisor \_\_\_\_\_  
 Duties \_\_\_\_\_  
 Date Started \_\_\_\_\_ Date Left \_\_\_\_\_  
 Reason(s) for leaving \_\_\_\_\_

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification of this application in any detail is grounds for disqualification from further consideration or for dismissal from employment in accordance with the Company policy. I agree to conform to the rules and regulations of the Company, and understand that my employment and compensation can be terminated, for any reason or for no reason, and with or without notice, at any time, at the option of either the Company or myself. I further understand that no personal recruiter or interviewer or other representative of the Company, other than the President has any authority to enter into agreement for employment for any specified period of time or to modify any terms and conditions of my employment. I further authorize the Company to verify all references and information provided by me in this application and release any person or company responding to any reference or information inquiry from any claim or liability on any information or opinion supplied.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Interviewed by Personnel _____	Date _____
Interviewed by Dept Manager _____	Date _____