

EMPLOYMENT APPLICATION

IMPORTANT: Thank you for your interest in employment with Weir's! Please **PRINT, USING INK.** ANSWER ALL QUESTIONS COMPLETELY. Incomplete applications cannot be considered. Resumes will be accepted as **additional** information but **not** in place of a completed application. Be sure to sign the application when it is completed. Weir's cannot accept an unsigned application.

EQUAL OPPORTUNITY EMPLOYER: It is our policy to abide by all federal, state and local laws prohibiting employment discrimination, including without limitation, discrimination based upon race, color, religion, sex, national origin, age, disability or genetic information.

Today's Date: _____

NAME: _____ Email: _____
(Last) (First) (Middle)

CURRENT ADDRESS: _____ Home Phone: _____
(Street) (Apt. #) Work Phone: _____

(City) (State) (Zip Code) Cell/Pager: _____

How long have you lived at current address? _____ How long at previous address? _____

Permanent Address (If applicable): _____
(Street) (Apt. #) (City) (State) (Zip Code)

Full-Time (minimum 38-40 hrs./week) Regular Part-Time (minimum 30-36 hrs./week) Reduced Part-Time (Less than 30 hrs./week) Seasonal (Hours/week? _____)

Position desired: _____ Location desired: Knox Plano Southlake Farmers Branch

Date available to start: _____ Pay desired: \$ _____ For scheduling: Days/hours available: _____

- Do you have the legal right to be employed in the United States? Yes No
- Have you ever applied for employment at Weir's? Yes No If yes, Month/Year(s): _____
- Have you ever been employed at Weir's? Yes No If yes, Month/Year(s): _____
- Is there any reason you would not be able to be at work on time every day? _____
- Are you 18 years of age or over? Yes No
- Have you ever received deferred adjudication or have you ever been convicted of a felony or misdemeanor or pleaded "No Contest" to a felony or misdemeanor? (Conviction will not necessarily disqualify an applicant.) Yes No
If yes, where and nature of offense: _____
- Is there any reason you cannot perform the essential functions of the job for which you are applying, or is there anything which may limit your ability to perform it? Yes No
If yes, explain: _____
If yes, what reasonable accommodation could Weir's make to enable you to perform the job?

- Weir's is closed Sundays, but most jobs at Weir's require associates to work on Saturday. Would anything prevent you from working during our normal hours, any day, Monday through Saturday, on a regular basis? Yes No
If yes, explain: _____



RECORD OF EDUCATION: (NOTE: Transcripts may be required for verification of education.)

	School Name Location - City, State	Circle Last Year Attended	Did You Graduate?	Specific Degree & Major	OPTIONAL: Graduation Date or Year Last Attended
ELEMENTARY SCHOOL		N/A	N/A	N/A	N/A
HIGH SCHOOL		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
COLLEGE (UNDERGRADUATE)		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		
GRADUATE SCHOOL (PROFESSIONAL)			<input type="checkbox"/> Yes <input type="checkbox"/> No		
OTHER (SPECIFY)		1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Do you plan to continue your education? Yes No

If so, where? _____ When? _____

SPECIAL SKILLS/QUALIFICATIONS: Please list all special skills you possess (equipment you are able to operate, etc.).

In addition, describe any specialized training and extra-curricular activities: _____

Typing, WPM: _____ 10-Key: _____ Other skills: _____
Computer Skills: _____

Current Licenses/Registrations/Certification (Indicate types and dates received): _____

Membership of civic, trade, professional and/or fraternal organization (if you believe your involvement is relevant to your ability to perform the job for which you are applying): _____

If you desire, please list volunteer work: _____

Fill out only if applying for a position which requires a driver's license. Driver's License #: _____ State: _____ Expiration Date: _____ LIST ANY MOVING VIOLATIONS IN THE PAST FIVE YEARS: _____
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LIST OTHER LANGUAGES	SPEAK Fair, Good, Fluent	READ Fair, Good, Fluent	WRITE Fair, Good, Fluent	SIGN (for hearing impaired) Fair, Good, Fluent
1 _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
2 _____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Please state any additional information that you feel may be helpful to us in considering your application. _____ _____

EMPLOYMENT RECORD:

Are you currently employed? Yes No
 Starting with the MOST RECENT, list your last 4 employers.

1. MOST RECENT EMPLOYER

<u>Company Name:</u>		<u>Address:</u>		<u>Type of Business:</u>		Full-Time <input type="checkbox"/>	
		<u>City & State:</u>		<u>Business Phone:</u>		Part-Time <input type="checkbox"/>	
						Seasonal <input type="checkbox"/>	
Starting Date:	Month/Year	Starting Base Salary	Ending Base Salary	Starting Position Title	Present or Last Title		
Ending Date:	Month/Year						
Immediate Supervisor's Name:		Briefly describe your duties and responsibilities:					
Supervisor's Title:							
Please detail the reason for leaving:							

2. PREVIOUS EMPLOYER

<u>Company Name:</u>		<u>Address:</u>		<u>Type of Business:</u>		Full-Time <input type="checkbox"/>	
		<u>City & State:</u>		<u>Business Phone:</u>		Part-Time <input type="checkbox"/>	
						Seasonal <input type="checkbox"/>	
Starting Date:	Month/Year	Starting Base Salary	Ending Base Salary	Starting Position Title	Present or Last Title		
Ending Date:	Month/Year						
Immediate Supervisor's Name:		Briefly describe your duties and responsibilities:					
Supervisor's Title:							
Please detail the reason for leaving:							

3. PREVIOUS EMPLOYER

<u>Company Name:</u>		<u>Address:</u>		<u>Type of Business:</u>		Full-Time <input type="checkbox"/>	
		<u>City & State:</u>		<u>Business Phone:</u>		Part-Time <input type="checkbox"/>	
						Seasonal <input type="checkbox"/>	
Starting Date:	Month/Year	Starting Base Salary	Ending Base Salary	Starting Position Title	Present or Last Title		
Ending Date:	Month/Year						
Immediate Supervisor's Name:		Briefly describe your duties and responsibilities:					
Supervisor's Title:							
Please detail the reason for leaving:							

4. PREVIOUS EMPLOYER

<u>Company Name:</u>		<u>Address:</u>		<u>Type of Business:</u>		Full-Time <input type="checkbox"/>	
		<u>City & State:</u>		<u>Business Phone:</u>		Part-Time <input type="checkbox"/>	
						Seasonal <input type="checkbox"/>	
Starting Date:	Month/Year	Starting Base Salary	Ending Base Salary	Starting Position Title	Present or Last Title		
Ending Date:	Month/Year						
Immediate Supervisor's Name:		Briefly describe your duties and responsibilities:					
Supervisor's Title:							
Please detail the reason for leaving:							

U.S. MILITARY SERVICE

Branch of Service: _____ (Rank, Rate or Special) Active Duty Dates: From _____ To _____

List of skills or experience used in military: _____

PERSONAL REFERENCES: (3 NON-FAMILY MEMBERS YOU HAVE KNOWN FOR 3 YEARS OR MORE)

Please give name, occupation, address and phone number below.

	Address	Phone Number
1. NAME:		
Occupation:		
2. NAME:		
Occupation:		
3. NAME:		
Occupation:		

WEIR'S MAY CONTACT:

Present Employer Yes No
 Former Employer(s) Yes No

WEIR'S SHOULD NOT CONTACT: [Please supply reason(s).]

Do you have any relatives working for Weir's? Yes No If yes, list names & relationships: _____

Referral source: Advertisement: _____ Employee Referral: _____
 Relative: _____ Walk-in: _____ Other: _____

Please read carefully before signing. If you have any questions regarding the following statements, please ask for clarification.

I hereby certify that the statements herein, as well as those on any attachment(s) to this form, are to the best of my knowledge true and correct and that they are all given of my own free will. I agree that any misstatement(s) or omission(s) as to material facts will constitute grounds for unfavorable consideration or dismissal from employment.

I authorize you to communicate with all my former employers, schools, officials, and personal references. *I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.*

I understand that as Weir's Furniture Village, Inc. deems necessary, I may be required to work overtime hours or hours outside a normally defined work day or work week. I understand that schedule changes may occur.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. If employed, I understand and agree that such employment may be terminated at any time and without any liability to me for continuations of salary, wages, or employment related benefits. I am free to resign at any time. Similarly, Weir's is free to terminate my employment at any time for any reason.

I understand that Weir's requires pre-employment drug screening for any job or position which entails heavy lifting, driving, or in which there is the potential for serious personal or bodily injury or property damage. If I have applied for such a job or position, then I further understand that any offer of employment to me by Weir's is subject to the results of such screening. Weir's has a drug policy in place that allows for random screening for drugs and alcohol when warranted for any job. In the event that such screening is necessary, I authorize both the drug screening itself as well as the release of the results of such screening to Weir's for its internal use. I also hereby release Weir's or any drug testing laboratory or facility from any liability related to the said drug screening and the results obtained thereby.

In the event of employment, I understand that false or misleading information given in my application or interview(s) is a very serious matter and may result in termination; and if employed, I understand that I am required to abide by all rules and regulations of the employer, Weir's Furniture Village, Inc.

APPLICANT'S SIGNATURE

 Date

Interviewed by: _____	Interview Date: _____
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