

# EMPLOYMENT APPLICATION

**NOTICE  
TO  
APPLICANTS**

**Applications will only be considered when all questions are answered.  
If a question does not apply to you, indicate "N/A" (not applicable).  
Print in ink, sign and date application**

TODAY'S DATE \_\_\_\_\_

NAME: \_\_\_\_\_  
LAST FIRST M.I.

SOCIAL SECURITY NUMBER: (provide if/when hired) \_\_\_\_\_

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

CURRENT ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

PRIOR ADDRESS: \_\_\_\_\_  
STREET CITY STATE ZIP

E-MAIL ADDRESS: \_\_\_\_\_

FOR WHICH SCHEDULE ARE YOU AVAILABLE? CHECK ALL THAT APPLY.

\_\_\_ WEEKDAYS \_\_\_ WEEKENDS \_\_\_ EVENINGS \_\_\_ OVERTIME \_\_\_ OTHER

POSITION APPLIED FOR \_\_\_\_\_

\_\_\_ PART TIME \_\_\_ FULL TIME \_\_\_ SEASONAL

WHERE DID YOU HEAR ABOUT THE POSITION? \_\_\_\_\_

ARE YOU 18 YEARS OF AGE OR OLDER? \_\_\_ YES \_\_\_ NO IF NO, HOW OLD? \_\_\_\_\_

HAVE YOU WORKED FOR THIS COMPANY BEFORE? \_\_\_ YES \_\_\_ NO

DATES: \_\_\_\_\_ TO \_\_\_\_\_  
MONTH/YEAR MONTH/YEAR

EMERGENCY CONTACT: \_\_\_\_\_

## EDUCATION

LIST ALL SCHOOLS- COLLEGE/ UNIVERSITY/ TRADE/ TECHNICAL TRAINING

NAME LOCATION DATES GRADUATED

NAME LOCATION DATES GRADUATED

NAME LOCATION DATES GRADUATED

NAME LOCATION DATES GRADUATED

**PREVIOUS EMPLOYERS**

**PLEASE NOTE:** YOUR APPLICATION WILL NOT BE CONSIDERED UNLESS EVERY QUESTION IN THIS SECTION IS ANSWERED. SINCE WE WILL MAKE EVERY EFFORT TO CONTACT PREVIOUS EMPLOYERS, THE CORRECT TELEPHONE NUMBERS OF PAST EMPLOYERS ARE CRITICAL. ASK FOR A PHONE BOOK OR CALL INFORMATION IF NEEDED.

MOST RECENT EMPLOYER	ARE YOU CURRENTLY EMPLOYED BY THIS EMPLOYER ___ YES ___ NO IF YES MAY WE CONTACT _____  PHONE # _____
<hr/> COMPANY NAME _____ CITY _____ STATE _____	
FROM _____ TO _____ JOB TITLE _____ SUPERVISOR NAME _____	
REASON FOR LEAVING: _____	
<hr/> SECOND MOST RECENT EMPLOYER PHONE # _____	
<hr/> COMPANY NAME _____ CITY _____ STATE _____	
FROM _____ TO _____ JOB TITLE _____ SUPERVISOR NAME _____	
REASON FOR LEAVING: _____	
<hr/> THIRD MOST RECENT EMPLOYER PHONE # _____	
<hr/> COMPANY NAME _____ CITY _____ STATE _____	
FROM _____ TO _____ JOB TITLE _____ SUPERVISOR NAME _____	
REASON FOR LEAVING: _____	

**CRIMINAL HISTORY**

A CONVICTION MAY NOT NECESSARILY DISQUALIFY YOU FROM EMPLOYMENT, ALL CIRCUMSTANCES WILL BE CONSIDERED.

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_ YES \_\_\_ NO

CONVICTION	CHARGE	COURT/LOCATION	DISPOSITION
1.			
2.			

**MOTOR VEHICLE INFORMATION**

DO YOU POSSESS A VALID DRIVERS LICENSE? ___ YES ___ NO			
DRIVERS LICENSE # _____		STATE _____	
LIST TRAFFIC VIOLATIONS FOR THE PAST 3 YEARS OTHER THAN PARKING VIOLATIONS.			
DATE	CHARGE	LOCATION	PENALTY
1.			
2.			

**AVAILABILITY FORM**

NAME \_\_\_\_\_

<b>DAY</b>	<b>HOUR AVAILABLE</b>
MONDAY	
TUESDAY	
WEDNESDAY	
THURSDAY	
FRIDAY	
SATURDAY	
SUNDAY	

*SCHEDULING PREFERENCES: Please indicate a range of hours desired*

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*If you are in school provide summertime and school time availability.*

*Written interview questions to be completed now....*

1. How many evenings per week can you work?
2. Can you work weekends? Holidays?
3. What kind of restrictions do you have on your schedule?
4. Will you go away more than one week during the summer?
5. What are your salary requirements? Please give a salary range.
6. When are you available to start?
7. Do you have means of transportation to get to work? Explain
8. Clarks has a dress code including but not limited to noticeable body piercing or unusual hair styles. Do you have a problem adhering to that?
9. What is your definition of stealing?
10. If you smoke, can you go all day without a smoke break?
11. Do you work with computers at home? How much do you know about computers?
12. Do you have any restrictions physical or otherwise?

***Students:***

13. What extracurricular activities do you have during the year?
14. What are your plans after graduation?
15. What is your GPA? \_\_\_\_\_ What are your grades in math? \_\_\_\_\_

“Under Maryland law, an employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment or continued employment. An employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100.00.”

I HAVE READ THE ABOVE AND UNDERSTAND IT.

By signing this application, I affirm that all statements are true and willful. Misrepresentation of facts will subject me to immediate discharge at any time.

\*Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

\*If submitting application via email, if selected, application can be signed during interview process.