



Application for Employment

Kids 'N' Stuff is an Equal Opportunity Employer

Please PRINT the requested information in the spaces provided. Use blue or black ink. Do NOT use pencil.

Date of application: _____ Date available: _____ Position applied for: _____
Month/Day/Year Month/Day/Year Part time Full time

PERSONAL DATA

Last Name First Name Middle

Address City, State, Zip

Home Phone☎: _____ Cell Phone☎: _____ Email: _____

Have you ever been employed with us before? No () Yes () if YES, please state date: _____

Are you currently employed? No () Yes () May we contact your present employer? No () Yes ()

Have you ever pled "guilty," "no contest," or been convicted of a crime? No () Yes ()

If yes, please explain: _____

Are you 18 years or older? No () Yes () If you are under 18 can you furnish a work permit? No () Yes ()

In accordance with the Immigration and Reform Act, Kids N Stuff will employ only persons legally authorized to work in the United States. Are you legally authorized to work in the United States for any employer? No () Yes ()

Proof of citizenship or immigration status will be required upon employment

EDUCATION INFORMATION

	HIGH SCHOOL	COLLEGE/ UNIVERSITY	GRADUATE PROFESSIONAL	Other (Specify)
School Name and Location				
Years/Credits Completed				
Diploma/Degree				
Describe course of study				

* If you are still in school, what is the anticipated date of your graduation? _____ Name under which your transcript was issued, if different from name shown on this application: _____

REFERENCES

Give the name, complete address (including zip code), and telephone number of three references who are not related to you.

Name	Address	Telephone, including Area Code	Occupation	Years Known

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EMPLOYMENT HISTORY/REFERENCES

List present position or most recent place of employment first (include full-time, part-time and volunteer work). PHOTOCOPY THIS PAGE IF ADDITIONAL SPACE WILL BE NECESSARY (OR USE A BLANK SHEET)

Employer		Dates Employed From To		Work Performed
Address		City, State, Zip Code		
Telephone Number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting Pay:	Final Pay:	
Reason for leaving				

Employer		Dates Employed From To		Work Performed
Address		City, State, Zip Code		
Telephone Number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting Pay:	Final Pay:	
Reason for leaving				

Employer		Dates Employed From To		Work Performed
Address		City, State, Zip Code		
Telephone Number(s)		Hourly Rate/ Salary		
Job Title	Supervisor	Starting Pay:	Final Pay:	
Reason for leaving				

APPLICANT'S STATEMENT

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision.

I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am unemployed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Applicant's Signature _____ Date _____
(Your legal signature: do not print)