

# EMPLOYMENT APPLICATION

(This application will be active for 30 days)

## Personal Information

Full Legal Name \_\_\_\_\_

Street Address \_\_\_\_\_ Apt. No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever applied at My Foster Kids Foundation, Inc. before? Yes  No

If so, when? \_\_\_\_\_

Have you ever worked at My Foster Kids Foundation, Inc. before? Yes  No

If so, dates: From \_\_\_\_\_ to \_\_\_\_\_ Position \_\_\_\_\_ Division \_\_\_\_\_

Can present employer be contacted? Yes  No  Do you have reliable transportation? Yes  No

Were you referred by a My Foster Kids Foundation, Inc. employee?  Yes  No If so, by whom? \_\_\_\_\_

For what position are you applying? \_\_\_\_\_

Production  Sales Associate  Full-time  Part-time  Office

Desired starting pay: \$ \_\_\_\_\_ per \_\_\_\_\_ How many hours per week do you want to work? \_\_\_\_\_

During what times are you available to work? (Part-time applicants use table below) \_\_\_\_\_

Are you willing to work:

Overtime? Yes  No  Nights? Yes  No  Weekends? Yes  No  Holidays? Yes  No

**Part-time applicants**, please enter the shifts/hours you are available to work.

Write in the start time and the stop time -- be sure to include a.m. or p.m. designation for each. **Example 6 a.m. - 3 p.m.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	Total Hours
Morning								
Mid Shift								
Evening								
Overnights								

When could you begin work? \_\_\_\_\_

Are you at least 18? Yes  No

## Skills and Experience

Please list any special qualifications, training, education, skills, or experience that you feel warrant consideration by My Foster Kids Foundation, Inc. \_\_\_\_\_

Please list any business equipment operating abilities you have which might be useful on the job that you are applying for: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Education

Highest elementary or high school grade completed. \_\_\_\_\_ Did you graduate from high school?  Yes  No

Name and location of college, university, business, or trade school	1	2
Full-time or Part-time	Full-Time      Part-time	Full-time      Part-time
Major field of study		
Degrees conferred	Title	Title
Hours credit		

# Work/Military Experience

**1**

Name of present or last employer		Type of business	Address	City	State
Start Date (Mo./Yr.) /	Leave date (Mo./Yr.) /	Starting Salary	Final Salary	Job title	Supervisor's Name
Type of Job Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Job description and responsibilities				
Were you fired? Yes <input type="checkbox"/> No <input type="checkbox"/>	Explain reasons/circumstances for changing or wanting to change jobs				
If we contact this employer, would you expect them to say they would rehire you for your last position held? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain					Employer's phone no.

**2**

Name of present or last employer		Type of business	Address	City	State
Start Date (Mo./Yr.) /	Leave date (Mo./Yr.) /	Starting Salary	Final Salary	Job title	Supervisor's Name
Type of Job Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Job description and responsibilities				
Were you fired? Yes <input type="checkbox"/> No <input type="checkbox"/>	Explain reasons/circumstances for changing or wanting to change jobs				
If we contact this employer, would you expect them to say they would rehire you for your last position held? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain					Employer's phone no.

**3**

Name of present or last employer		Type of business	Address	City	State
Start Date (Mo./Yr.) /	Leave date (Mo./Yr.) /	Starting Salary	Final Salary	Job title	Supervisor's Name
Type of Job Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Job description and responsibilities				
Were you fired? Yes <input type="checkbox"/> No <input type="checkbox"/>	Explain reasons/circumstances for changing or wanting to change jobs				
If we contact this employer, would you expect them to say they would rehire you for your last position held? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain					Employer's phone no.

## Legal

Have you ever been caught in a sting operation selling tobacco or alcohol to a minor?  Yes  No

Have you ever been convicted of a crime or pled "No Contest" on anything involving theft, dishonesty, violence, drugs, or endangerment of persons or property, whether resulting in incarceration, probation, or a suspended or deferred sentence?  Yes  No  Pled No Contest

If yes, or No Contest, date of conviction \_\_\_\_\_ Please explain \_\_\_\_\_

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Conviction of a crime will not necessarily disqualify you from consideration for employment.

## Authorization

By signing this application for employment, I certify that I have read and understand all parts of it and certify that I have truthfully and completely answered all questions. I understand that falsification of any of the information given herein or on any other employment form is grounds for immediate termination, regardless of when such falsification may be discovered.

I understand my employment with My Foster Kids Foundation, Inc., dba Fosters reStore is for no definite length of time. I understand my employment may be terminated at any time, with or without cause, at the option of either My Foster Kids Foundation, Inc., dba Fosters reStore or myself. I understand that no employee or representative of My Foster Kids Foundation, Inc., dba Fosters reStore has any authority to make any agreement which is contrary to the foregoing. If accepted for employment, I agree to comply with all company policies and procedures, and with all rules and regulations made known at the time of employment or any other time thereafter, and to perform all duties assigned to me to the best of my ability.

Signature \_\_\_\_\_ Date \_\_\_\_\_

My Foster Kids Foundation, Inc., dba Fosters reStore is an equal opportunity employer. All applications for employment will be considered without regard to race, color, religion, sex, national origin, disability, age (over the age of 40), genetic makeup, veteran status or any other protected category in the state where you are applying. This application will remain active for 30 days. After that time, it must be renewed by the applicant if he/she wishes to be reconsidered for employment.

Thank you for your interest in employment at My Foster Kids Foundation, Inc., dba Fosters reStore Your qualifications and experience will be compared with the job requirements. We will contact the most qualified candidates within 15 business days.

# PRE-EMPLOYMENT AUTHORIZATION AND RELEASE

All information provided by me in support of my application for employment is true and complete to the best of my knowledge. I understand that misrepresentation or omissions may be cause for rejection or may be cause for subsequent dismissal if I am hired.

I voluntarily and knowingly authorize my former employer, person, firm, corporation, organization, school, or government agency, its officers, employees and agents, to release all information concerning my former employment, and to release requested academic records and public record information, to said prospective employer, its officers, employees and agents, or any other person or entity making a written or oral request for such information on behalf of this employer. I understand the employment information may include, but is not necessarily limited to performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand, opinions, and public record information, regarding my suitability for employment possessed by it. I recognize a copy of this authorization and release is as valid as the original and should be considered as such.

I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless such former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's fees, present or future, whether know or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment which the officer, employee or agent disclosing such facts knows are untrue.

Candidate's Signature	Date	Witness' Signature	Date
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\_\_\_\_\_  
Print Candidate's Name

For reference checking purposes only, complete the following information: (please print)

1. May your CURRENT supervisor, and/or any reference or individuals associated with your CURRENT employer (including Human Resources department) be contacted?  
 Yes  
 No      Specific Comments: \_\_\_\_\_

2. For purposes of a criminal background check, please provide:
  - Name (First, Middle, Last): \_\_\_\_\_
  - Any FORMER or ALTERNATE names such as change of last name, and/or use of assumed name or nickname: \_\_\_\_\_
  - Sex:                      Male \_\_\_\_\_ Female \_\_\_\_\_
  - Race: \_\_\_\_\_
  - Date of Birth (mm/dd/yy): \_\_\_\_\_
  - Social Security Number: \_\_\_\_\_