

APPLICATION FOR EMPLOYMENT

Please complete entire application to ensure processing.

PERSONAL INFORMATION (Please print)				D	Date of Application:				
Name First	Middle			·	Last				
Are you legally eligible for employment in provide proof of eligibility to work in the U.S.)	n the U.S.? (All new hi Yes No	ires will be required to	Email Add	ress					
Address Street			City		St	ate/Province	Zip	O Code/Postal Code	
Phone Number Daytime			Evening						
EMPLOYMENT DESIRED (if yo	u are applying for a	retail hourly position,	please kee	o in min	d that the ava	ilability of hours	may	vary.)	
Position Locati	Position Location/Department Salary/Hourly Pay Desired Date You Can Start								
Specify hours available for each day of the v	week Monday	Tuesday	Wednesd	ay	Thursday	Friday		Saturday	Sunday
Are you able to work overtime?		If yes, when?							
Have you ever worked for a Fleet Feet Sport	is store?	If yes, when?		Which	store/departme	ent?			
EDUCATION	Name a	nd Address of Schoo	l	Years Completed. Did You Graduate? Subjects Studied and Degrees Received			d Degrees		
High School				-					
College									
Post College									
Trade, Business, or Correspondence School				-					
List skills relevant to the position applied for:									
Define customer service in your words:									
Have you ever visited a Fleet Feet Sports location? Where? Describe your experience:									
Why would you like to work for Fleet Feet Sports?									
Tell us about your running history and goals	<u>.</u>								

	EMPLOYERS List below current and last three end which is related to the job for which you are applying. Please			se include ar	ny non-paid/volunteer	
Date (M/D/Y)						
From	Current Employer (Name and Address of Employer - Type of Business)	Salary Or Hourly Starting: Ending:	Position Reaso		on For Leaving	
То		If hourly, average # of hours per week:				
Duties Perforr	ned:					
Supervisor's Name:		Phone Number:		May We Contact?		
From	Current Employer (Name and Address of Employer - Type of Business)	Salary Or Hourly Starting:	Position	Position Reason	For Leaving	
То		Ending: If hourly, average # of hours per week:				
Duties Performed:						
Supervisor's Name:		Phone Number:			May We Contact?	
From	Current Employer (Name and Address of Employer - Type of Business)	Salary Or Hourly Starting: Ending:	Position	Reasor	n For Leaving	
То		If hourly, average # of hours per week:				
Duties Performed:						
Supervisor's Name:		Phone Number:			May We Contact?	

REFERENCES Give below the names of three professional references, whom you have known at least one year.					
Name		Address & Phone Number Business		Years Acquainted. How do you know this person?	

I hereby authorize Fleet Feet Sports to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by Fleet Feet Sports to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any and all claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that I may be required to sign a confidentiality and/or non-compete agreement, should I become an employee of Fleet Feet Sports I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Fleet Feet Sports to hire me.

I understand and agree that my employment is at will, which means that it is for no specified period and may be terminated by me or Fleet Feet Sports at any time without prior notice for any reason.

Date