

## **APPLICATION FOR EMPLOYMENT**

Please complete the entire application to ensure processing.

PERSONAL INFORMAT	ION ( p	olease p	rint)								
Name											
Last				First				Mi	Middle		
Address Street	City	y, Sta	te Zip Code								
Phone Number(s)	Phone Number(s) Referred by										
Daytime ( ) - Evening ( ) -											
Are you legally eligible											
(All new hires are requi											
Conviction: Have you											
If yes, list convictions the			•	•		ns). A convi	ction will not	t nece	ssarily disqualify	you for	
employment. Include to	ype of	crime a	nd date of convic	tion on a separate sh	eet.						
EMPLOYMENT DESIRED (keep in mind that the availability of hours may vary.)											
Position	1			Wage des				Date you can start			
Specify hours	Mon	onday Tuesday Wed		Wednesday	Thursday		Friday		Saturday	Sunday	
available each day of											
the week.	FI 4 F					) A /  - !	-1				
Have you worked for a	Fleet F	-eet Spc	orts store?Yes	s 🔝 No if yes, when	1:	wni	ch store?				
EDUCATION			Name and Ad	dress of School Did you gra			aduate? Course		Course of study	rse of study/major	
High School		, ,									
-				Yes No							
College											
					Yes No						
Doct College											
Post College						Yes No					
Trade, Business or					☐ Yes ☐ No						
Correspondence School											
SKILLS: List skills releva	ant to p	position	applied for:								
Back office skills: (include computer proficiency – Word, Excel, others)											
Have you ever been a Fleet Feet Customer? Yes No Where?											
Describe your experience:											
Why would you like to work at Fleet Feet Sports?											
Describe a specific situr	ation in	n which	you have provide	ad excellent customor	consi	co in vour m	act recent no	ocition	1 Why was this	effective?	
Describe a specific situation in which you have provided excellent customer service in your most recent position. Why was this effective?											

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WORK EXPERIENCE								
			with the most recent one		ase include any volunt	teer expe	erience w	hich is related to the
job for which you are	e applying. Please o	complet	e even if you attach a resu	me.				
Date: (mm/dd/yy)	Current employer (Name, type of business)				tarting Pay:	Pay: Ending Pay:		
From:								
To:								
Job Title:			Reason for Leaving:			Avera	ge # of h	ours per week
Duties Performed:						1		
Supervisor's Name:				P	hone #:			May we contact?  Yes No
Date: (mm/dd/yy)	Previous employe	er (Nam	e, type of business)	S	tarting Pay:	Ending	g Pav:	
From:		(	c, t, pc o. sascos,		······································		5 . ~ 7 .	
To:								
Job Title:				R	eason for Leaving	Avera	ge # of h	ours per week
Duties Performed:								
z acies i cirorinea.								
Supervisor's Name:			P	Phone#/email address: May we contact				
								∐ Yes ∐ No
Date (mm/dd/yy)	Previous employe	er (Nam	e, type of business)	S	tarting Pay:	Ending	g Pay:	Yes No
Date (mm/dd/yy) From:	Previous employe	er (Nam	e, type of business)	S	tarting Pay:	Ending	g Pay:	Yes No
	Previous employe	er (Nam	e, type of business)	S	tarting Pay:	Ending	g Pay:	Yes No
From:	Previous employe	er (Nam	e, type of business)  Reason for Leaving:	S	tarting Pay:		-	Yes No  Ours per week:
From: To: Job Title:	Previous employe	er (Nam					-	ours per week:
From: To:	Previous employe	er (Nam			tarting Pay:		-	
From: To: Job Title:	Previous employe	er (Nam					-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name:	Previous employe	er (Nam					-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name:	Previous employe	er (Nam					-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name:	Previous employe	er (Nam					-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name: Duties Performed:			Reason for Leaving:	P	hone:	Averag	-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name: Duties Performed:		three p	Reason for Leaving:	P	hone: ave known at least on	Averag	-	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name: Duties Performed:		three p	Reason for Leaving:	P	hone:	Averag	ge # of ho	ours per week:  May we contact?
From: To: Job Title: Supervisor's Name: Duties Performed:  REFERENCES: Please		three p	Reason for Leaving:	P	hone: ave known at least on	Averag	ge # of ho	ours per week:  May we contact?  Yes No
From: To: Job Title: Supervisor's Name: Duties Performed:  REFERENCES: Please		three p	Reason for Leaving:	P	hone: ave known at least on	Averag	ge # of ho	ours per week:  May we contact?  Yes No
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From: To: Job Title: Supervisor's Name: Duties Performed:  REFERENCES: Please		three p	Reason for Leaving:	P	hone: ave known at least on	Averag	ge # of ho	ours per week:  May we contact?  Yes No
From: To: Job Title: Supervisor's Name: Duties Performed:  REFERENCES: Please		three p	Reason for Leaving:	P	hone: ave known at least on	Averag	ge # of ho	ours per week:  May we contact?  Yes No

## PLEASE READ CAREFULLY

Fleet Feet Sports does not discriminate in hiring on basis of race, color, religion, sex, national origin, disability, veteran status, or your membership in any protected class protected under law of this jurisdiction.

By signing below,

- I hereby authorize Fleet Feet Sports to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment.
- I certify that all statements made by me on this application are true and complete to the best of my knowledge and that any misrepresentations or omissions may be the cause for rejection of my application, or may be cause for subsequent dismissal, if I am hired
- 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

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	an employment contract.				
•	I understand that filling out this fo	rm does not ind	icate there is a position	open and doe	s not obligate Fleet Feet Sports to hire me.
•	I further understand and agree that	it my employme	ent, if granted, is "at will	", which mean	ns that it is for no specified period and may be
	terminated by me or Fleet Feet Sp	orts at any time	without prior notice for	r any reason.	
Signatur	e of Applicant:				Date:
INTERNA	AL OFFICE USE				
Referen	ces:				
Date	Organization		Contact	Inf	ormation obtained
Criminal	Background Check Performed:	Yes No			
Eligible f	or hire? Yes No	Initials of emp	loyee who completed t	his section :	

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