

Work at MollyUSA

EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Name (Last)	First	M.I.	Social Security No.				
Home Address	City	State	Zip				
Mailing Address (if different from home)	City	State	Zip				
Home Telephone ()	Mobile ()	Business Telephone ()	May we contact you at work? Yes No				
Position Applying For Summer	Willing work for the Holidays yes no	Are you interested in (check all that apply) Full-time Part-time Temporary					
Days and hours available. Complete if applying for restaurant position. hired) If you are 16 or older, please state your date of birth (no one under age 16 may be							
Days	Mon	Tue	Wed	Thur	Fri	Sat	Sun
From							
To							
	/	/	/				
	mo.	day	yr.				

EDUCATION

Type of School	Name and Location of School			Degree/Area of Study	Number of Years Attended	Graduated (Check One)	
High School	Name	Address				Yes	No
	City	State	Zip				
College	Name	Address				Yes	No
	City	State	Zip				
Graduate School	Name	Address				Yes	No
	City	State	Zip				
Other	Name	Address				Yes	No
	City	State	Zip				

U.S. MILITARY SERVICE

Branch of Service	Technical Specialization	Rank Attained
-------------------	--------------------------	---------------

LEGAL

Are you a U.S. citizen or do you have a legal right & necessary documents to work in the U.S.? Yes No
 (Identity and employment eligibility of all new hires will be verified as required by the Immigration Reform and Control Act of 1986.)

Were you ever discharged by any company? Yes No. If yes, give name of company
 (ies) _____.

Reason for discharge _____

Have you ever been convicted of a crime other than a minor traffic violation? (Note: You are not obligated to discuss sealed or expunged records of conviction or arrest nor will such information be asked of you or considered in employment decisions.) The existence of a criminal record will not automatically disqualify you from the job for which you are applying. Yes No. If yes, please explain offense and final disposition:

EMPLOYMENT HISTORY

List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. May we

contact you present employer? Yes No Past employer? Yes No Please indicate if you were employed under a different name.

DATES	NAME AND ADDRESS OF EMPLOYER	POSITION HELD AND SUPERVISOR	LIST MAJOR DUTIES	SALARY OR WAGGES	REASON FOR LEAVING
From: _____ mo. yr. To: _____ mo. yr.	Name	Your Job Title		Starting	
	Address	Supervisor		Final	
	City				
	State	Phone ()			
From: _____ mo. yr. To: _____ mo. yr.	Name	Your Job Title		Starting	
	Address	Supervisor		Final	
	City				
	State	Phone ()			
From: _____ mo. yr. To: _____ mo. yr.	Name	Your Job Title		Starting	
	Address	Supervisor		Final	
	City				
	State	Phone ()			
From: _____ mo. yr. To: _____ mo. yr.	Name	Your Job Title		Starting	
	Address	Supervisor		Final	
	City				
	State	Phone ()			

REFERENCES

Business references: (do not list relatives)

Name	Address	Work Phone No.	Title	Years Known
		()		
		()		
		()		

PLEASE READ CAREFULLY

I understand that, with my authorization, an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history, subject to applicable federal, state and/or local laws.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate dismissal.

I understand and agree that if employed, the employment will be "at will". That is, either I or MollyUSA may end the employment relationship at any time, for any reason, or for no reason. I understand that receipt of this application by MollyUSA does not imply employment and that this application and/or any other Molly USA documents are not contracts of employment.

APPLICANT'S SIGNATURE

_____/_____
DATE SIGNED