

Application for Employment – Delivery Associate

Please submit application in the form on our website or to purchasing@hometownrefurnishing.com

Applicant Name:			Date:	//	_
	First Name	Last Name			
Address:					
Street, City, Sta	ate, Zip Code				
Phone: ()	Emai	1:			
Date of Birth:/_	/	Date Available to Be	ing Work:	//	
Are you legally eligible Proof of U.S. citizenship or im			,	Yes	No
If you are under 18, car	ı you provide a v	work permit as require	ed?	Yes	No
Do you have a valid dri	vers license?			Yes	No
Do you have reliable tra	ansportation to v	work?		Yes	No
Do you have a criminal	record?			Yes	No
Are you currently a stud	dent?			Yes	No
How were you referred	to us?				

Availability

If your availability is the same for every season, you only need to fill out one.

If you are filling this out as a student (high school / college), please indicate to the best of your knowledge as we can work around varying semester class schedules.

Spring:

Write times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
that you are				-	_	
available						
each of						
these days						

Summer:

Write times	s Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
that you are	e					
available						
each of						
these days						

Fall:

Write times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
that you are						
available						
each of						
these days						

Winter:

Write times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
that you are						
available						
each of						
these days						

Regular Store Hours (for reference):

Monday, Tuesday, Wednesday: 10a-5p

Thursday: 10a-6p

Friday: 10a-7p

Saturday: 9a-3p

Sunday: Closed

Employment History

Please list your last four (4) jobs, assignments, or volunteer history, starting with the most recent. Babysitting, lawn care, and similar jobs may be included.

Employer Information	Name:	Address:	Phone:
Job Information	Position Held:	Job Summary:	Immediate Supervisor & Title:
Dates Employed	From:	To:	Reason for Leaving:
Wage/Salary Earned	Starting Wage / Salary:	Ending Wage / Salary:	
Employer Information	Name:	Address:	Phone:
Job Information	Position Held:	Job Summary:	Immediate Supervisor & Title:
Dates Employed	From:	To:	Reason for Leaving:
Wage/Salary Earned	Starting Wage / Salary:	Ending Wage / Salary:	
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Dates Employed	From:	To:	Reason for Leaving:
Wage/Salary Earned	Starting Wage / Salary:	Ending Wage / Salary:	
Employer Information	Name:	Address:	Phone:
Job Information	Position Held:	Job Summary:	Immediate Supervisor & Title:
Dates Employed	From:	To:	Reason for Leaving:
	Starting Wage / Salary:	Ending Wage / Salary:	

Educational Background

Name & Location	Current Grade / Level if Still Attending	GPA	Did you Graduate?	Focus of Study
High School				
College			Degree:	Major:
Other				

References

Name of Reference	Title / Relationship	Phone	Email Address

I understand that completion of this application does not indicate that there are any positions open and does not obligate Hometown Refurnishing LLC. to hire me. Hometown Refurnishing, LLC. is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

I certify that all of the answers given in this application are true and complete to the best of my knowledge and that I have personally completed this application. I understand that providing false or misleading information or omitting pertinent information in my application or a job interview shall be grounds for rejection of this application or for immediate discharge if I am employed, whenever it may be discovered.

I hereby give Hometown Refurnishing, LLC. the right to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references, as well as any driver record history, credit history, or criminal background checks considered necessary. I hereby release from liability the employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the Employer and still wish to be considered for employment, it will be necessary to fill out a new application.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

I acknowledge that I have read and understand the statements above.

Applicant Signature:	Date:	/	/	