

Application for Employment with Francesca's Collections

Personal Information:

Name: _____ **Date:** _____
Present address: _____ **Social Security#:** _____
City: _____ **State:** _____
Permanent address: _____ **City:** _____ **State:** _____
Phone #: _____ **Referred by:** _____

Employment Desired:

Position: _____ **Date you can start:** _____
Salary desired: _____ **Are you employed?** _____
May we inquire of your present employer? Yes _____ **No** _____
Have you ever applied with Francesca's before? _____ **Where?** _____ **When?** _____

Education History:

	Name & location	Years attended	Did you graduate?
High School			
College			
Trade schools or business school			

Former Employers:

Date:	Name & address	Salary	Position	Reason for leaving
to: from:				
to: from:				
to: from:				

General Information:

Special studies or special skills:

References:

Name:	Address & phone number:	Years known:

Days available: _____

Hours available: _____

Authorization:

"I certify that all the facts contained in this application are true and complete to the best of my knowledge and understand that falsified statements on this application shall be grounds for termination. I authorize investigation of all statements contained herein and the references concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date: _____

Signature: _____

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