



# EMPLOYMENT APPLICATION

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Store Location Applying For: \_\_\_\_\_ Date Available To Start: \_\_\_\_\_

Position Applying For: \_\_\_\_\_  Full Time  Part Time

Are you a citizen of the United States? YES  NO  If No, are you authorized to work in the U.S.? YES  NO

Have you ever worked for this company? YES  NO  If Yes, when? \_\_\_\_\_

Have you ever been convicted of a felony? YES  NO  If Yes, explain: \_\_\_\_\_

**DEZIGNS BY KAMOHOALII REQUIRES ALL APPLICANTS TO BE 18 YEARS OF AGE OR OLDER TO WORK**

## Availability To Work

*Please indicate the hours you are available to work during both day and evening (i.e. 9am-1pm, 4pm-9pm)*

MON	TUE	WED	THUR	FRI	SAT	SUN

## Education

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Work Experience

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

Dates Worked From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this employer? YES  NO  If No, please explain: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

Dates Worked From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this employer? YES  NO  If No, please explain: \_\_\_\_\_

Employer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary:\$ \_\_\_\_\_ Ending Salary:\$ \_\_\_\_\_

Duties/Responsibilities: \_\_\_\_\_

Dates Worked From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact this employer? YES  NO  If No, please explain: \_\_\_\_\_

References

Please list three professional and or personal references whom you have known for at least one year. References will be contacted to attest your ability to perform the job you are applying for.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

How long known? \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

How long known? \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

How long known? \_\_\_\_\_

Applicant Statement/Certification

All of the information I have provided in this application is a true and complete statement of the facts, and if employed, any false statement or omission could result in immediate dismissal. I further authorize you to contact all of my previous employers and/or references for full information regarding my employment and release them from any and all liability for the information they provide. If I am employed, I agree to abide by the rules and regulations of Deziqns By Kamohoalii. I understand that my employment is at-will meaning that I am free to resign at any time. Similarly Deziqns By Kamohoalii is free to terminate my employment at any time for any reason. Deziqns By Kamohoalii is an Equal Employment Opportunity Employer.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

INTERNAL USE ONLY			
Date Rcvd	Initials	Date Revd	Initials