EMERALD HOME FURNISHINGS (EMERALD) IS AN EQUAL OPPORTUNITY EMPLOYER DEDICATED TO A POLICY OF NON- DISCRIMINATION IN EMPLOYMENT (INCLUDING APPLICATION FOR EMPLOYMENT) ON ANY BASIS INCLUDING RACE, COLOR, RELIGION, NATIONAL ORIGIN, ANCESTRY, CITIZENSHIP, SEX, AGE, PHYSICAL OR MENTAL DISABILITY, MEDICAL CONDITION, PREGNANCY, VETERAN OR MILITARY STATUS, OR ANY OTHER BASIS PROHIBITED BY LOCAL, STATE, AND FEDERAL LAW.

APPLICANTS WITH DISABILITIES MAY BE ENTITLED TO REASONABLE ACCOMMODATION UNDER THE TERMS OF THE AMERICANS WITH DISABILITIES ACT AND CERTAIN STATE OR LOCAL LAWS. A REASONABLE ACCOMMODATION IS A CHANGE IN THE WAY THINGS ARE NORMALLY DONE WHICH WILL ENSURE AN EQUAL EMPLOYMENT OPPORTUNITY WITHOUT IMPOSING UNDUE HARDSHIP ON EMERALD HOME FURNISHINGS. PLEASE CONTACT EMERALD HOME FURNISHINGS IF YOU NEED ASSISTANCE COMPLETING THIS APPLICATION OR TO OTHERWISE PARTICIPATE IN THE APPLICATION PROCESS.

PLEASE READ AND ANSWER ALL QUESTIONS CAREFULLY. YOUR FAILURE TO RESPOND TO ALL QUESTIONS MAY DISQUALIFY THIS APPLICATION FROM FURTHER CONSIDERATION. ALL INFORMATION MUST REFLECT A COMPLETE AND ACCURATE RECORD OF YOUR EDUCATION AND EMPLOYMENT HISTORY.

**PERSONAL INFORMATION**

|  |
| --- |
| Last Name First Name MI |
| Present Street Address City State Zip |
| Home Phone (w/ area code) Cell Phone (w/ area code) Work Phone (w/ area code) |
| Email Address (personal) Email Address (work) |
| Position Applying for: List any other names you’d be known by for employment records or education |

Are you legally authorized to work in the United States? Yes No Are you at least 18 years of age? Yes No

Will you now or in the future require sponsorship for an immigration-related employment benefit? Yes No

**JOB INTERESTS**

Are you available to work:  Full Time  Part Time  Temporary  Contract

What shift(s) are you available?  Day Shift  Night Shift  Weekends Are you able to work overtime?:  Yes  No

Have you previously applied at or worked for Emerald Home Furnishings? Yes No

If “yes”, when and what position?

Do you have any relatives working for us? Yes No If yes, who? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you learn about this opportunity?

If an employee referred you, include the employee’s name

Salary Desired $ Hourly/Annual

Date Available Will you relocate, if necessary? Yes No

**EDUCATION**

Please list your educational background, beginning with High School. Include technical school and military training, etc.

|  |  |  |  |
| --- | --- | --- | --- |
| Name and location of school | Major/Degree | Graduated | |
|  |  | * Yes | * No |
|  |  | * Yes | * No |
|  |  | * Yes | * No |
|  |  | * Yes | * No |

List any vocational or business-related courses and training: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROFESSIONAL REFERENCES**

List four work or school references who know your employment qualifications. Include at least two supervisors.

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Phone number (w/ area code)** | **Company Name & Job Title** | **Relationship to you** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**EMPLOYMENT/WORK EXPERIENCE**

|  |
| --- |
| **Complete this portion even if attaching your resume. Please list your employment history starting with your current / most recent employer.**  **Include military service and self-employment. Please account for the last 10 years of employment. Use additional paper if necessary.** |
| Employer Name Position Held Phone Number (w/ area code) |
| Street Address City State Zip |
| Dates Employed Supervisor Name and Position  From To |
| Job Duties |
| Reason for Leaving |
| May we contact this employer?  Yes  No If “no” please indicate reason: |
| Employer Name Position Held Phone Number (w/ area code) |
| Street Address City State Zip |
| Dates Employed Supervisor Name and Position  From To |
| Job Duties |
| Reason for leaving |
| May we contact this employer?  Yes  No If “no” please indicate reason: |
| Employer Name Position Held Phone Number (w/ area code) |
| Street Address City State Zip |
| Dates Employed Supervisor Name and Position  From To |
| Job Duties |
| Reason for leaving |
| May we contact this employer?  Yes  No If “no” please indicate reason: |
| Employer Name Position Held Phone Number (w/ area code) |
| Street Address City State Zip |
| Dates Employed Supervisor Name and Position  From To |
| Job Duties |
| Reason for leaving |
| May we contact this employer?  Yes  No If “no” please indicate reason: |

Please identify and explain any gaps in employment greater than 90 days:

From To Reason for Unemployment

Have you been dismissed or asked to resign from any position?  Yes  No If “yes”, please explain:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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List any skills or abilities you have which are pertinent to the position, including hobbies or related interests:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Is there any reason you might be unable to meet our attendance requirements? ❒ Yes ❒ No

If yes, please explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Will you be able to perform the essential functions of the job, with or without reasonable accommodation? ❒ Yes ❒ No

|  |
| --- |
| **PLEASE READ EACH OF THE FOLLOWING ITEMS BEFORE SIGNING THIS APPLICATION** |

1. **I CERTIFY** that the facts contained in this application are true and complete, and understand that if employed, false, misleading or incomplete statements on this application shall be grounds for immediate dismissal.
2. **I AUTHORIZE** the company to investigate and verify any information contained in my application or pre-hire interviews, including my previous employment, education and background. I further release all parties from all liability for any damage that may result from furnishing or receiving such information.
3. **I UNDERSTAND** that I may be subject to a pre-employment drug test after receiving a conditional offer of employment and that I must receive a negative result in order to be permitted to commence work with Emerald where allowed by law. I understand that where permissible under applicable federal, state and local law, I may be required to provide authorization for verification of my driving history and driving licenses if such information is related to the position for which I am applying consistent with business necessity.
4. **I UNDERSTAND AND AGREE** that my employment and compensation may be terminated at any time without prior notice, with or without reason, at the option of Emerald or myself, and understand that no representative of Emerald, other than the President, has authority to enter into any agreement contrary to the foregoing.
5. By signing below, I certify and acknowledge that I have read the statements and that I understand them.

Signature of Applicant Date