



EMPLOYMENT APPLICATION

CabinetsNMore is an Equal Opportunity Employer

Applicants are considered for all positions without regard to race,color, creed, religion, sex, national origin, age, disability, marital or veteran status, or any other status protected by applicable federal, state or local law.

PERSONAL

Last Name	First	Middle	Date
Present street address			Home Phone
City, State, Zip			Business/message phone
Previous street address			Social security no.

City, State , Zip

Have you ever applied for employment with **CabinetsNMore**? Yes___ No___

Have you ever been employed with **CabinetsNMore**? Yes___ No___

If yes: month and year Location:

Are you at least 18 years of age? Yes___ No___

If no, do you have a work permit? Yes___ No___

Name and address of parent or guardian if applicant is a minor.

If hired, can you provide proof that you are eligible to work in the United States? Yes___ No___
(Upon hire, you will be required to provide proof of your identity and authorization to work)

Have you ever been convicted of a felony? Yes___ No___ (Note: A conviction will not necessarily disqualify an applicant from employment)

If yes, state the nature of the offense, where and when it occurred and the sentence imposed. Please provide any further information you would like us to know.

EMPLOYMENT DESIRED

Position desired	Salary expected
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Specify hours and days available Full-time___ Part-Time___ On Call or Temporary___

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Will your work overtime if asked Yes___ No___

Date Available for work

How were you introduced to **CabinetsNMore**?
 Walk-In Employee referral College/University Career Fair CNM Web side Other Web Site Newspaper ad.
Which One?

Are you acquainted with anyone who works for **CabinetsNMore**? Yes___ No___

Name

EMPLOYER 4

Company name	Telephone
Address	Employed (state, month and year) From _____ To _____
Name of Supervisor	Weekly pay Start _____ Last _____
State job title and describe your work	Reason for leaving
Is there a reason why you would not want us to contact this employer?	Your name when employed, if different than present name.

EMERGENCY

In case of emergency, please notify:

Name

Address _____ City _____ State _____ Zip _____

Daytime phone number _____

EDUCATION

High School	City	Course of study	Graduate?	Circle year completed 9 10 11 12
Tech or trade school	City	Course of study	Graduate?	1 2 3 4
College/University	City	Major Degree	Graduate?	1 2 3 4
College/University	City	Major Degree	Graduate?	1 2 3 4

Additional job-related seminars, short courses, workshops or other educational experiences?

Please list any job-related clubs, professional societies, or other associations to which you belong. You may omit those which indicate your race, religious creed, color, national origin ancestry, sex age, or other status protected by applicable law.

SKILLS

For Sales Applicants: What type of merchandise have you sold?

List any other special training or skills (e.g., computer, machine operation, foreign language fluency, etc.) relevant to the position for which you are applying.

Why would you like to work for **CabinetsNMore**?

Describe a specific situation where you have provided excellent customer service in your most recent position. Why was this effective?

AGREEMENT

I hereby certify that the information that I have provided in this employment application is true and correct to the best of my knowledge, and that I have not withheld information that would, if disclosed, affect this application unfavorably.

I understand that falsified or intentionally misleading information in any detail or significant omissions from this application may disqualify me from further consideration for employment or may result in my termination if discovered after my hire. I agree that **CabinetsNMore** shall not be liable for disqualifying or terminating me under such circumstances.

I authorize **CabinetsNMore** and its agents to investigate my personal, educational and employment history; agree to cooperate in such investigation; and authorize any former employer, school, person, firm, corporation, credit agency, government agency, or other entity to provide **CabinetsNMore** with any information he or she may have about me, to the full extent permitted by applicable law. In consideration of **CabinetsNMore's** review of this application, I hereby release **CabinetsNMore**, its agents, and all providers of information from any liability that results from furnishing or receiving this information, except as otherwise limited by applicable law.

I understand that my employment is at will and can be terminated for any reason, with or without notice, at any time, at either the Company's or my option.

I further agree that if employed, I will conform my conduct to **CabinetsNMore** rules and regulations.

I have read the above Applicant Agreement, and understand and agree to its terms

Signature: _____ Date: _____

REFERENCE CHECK (To be completed by Personnel Department)

Name	Comments	Referenced returned
1		
2		
3		
4		

By: _____ Date: _____