



SUB STATION II



Employment Application

Position(s) Applied for _____ Date _____

Referral Source (please check all that apply)

Advertisement Employee Relative

Walk-in Other: _____

Name of Referral Source (if applicable): _____

P E R S O N A L	Name: Last	First	Middle	Social Security Number:
	Address: Street	Apt #	City	State Zip
	Telephone: Home	Work	Mobile:	Beeper/Other:
	E-mail Address:			

If necessary, the best time to call you at home	Best Time ___:___ AM/PM
May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, phone #	Best Time ___:___ AM/PM
Are you legally eligible for employment in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No Date available for work: _____	
What is your desired salary range?	
Type of employment desired <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal <input type="checkbox"/> Volunteer	
Are you able to meet the attendance requirements of the position?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will you work overtime if required?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Store Location Applying For (<i>check one</i>):	
Arrowood <input type="checkbox"/>	South Tryon (Carowinds) <input type="checkbox"/>

2 Great Locations!

816-A East Arrowood Road Charlotte, NC 28217 (704) 554-1988 fax: (704) 554-1981	10720 South Tryon Street, Suite O Charlotte, NC 28273 (704) 588-4772 fax: (704) 588-4773
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Are any of your relatives presently employed with Sub Station II?	__ Yes __ No
Have you ever worked for Sub Station II ? __Yes __ No If yes, where?	Date
Have you ever been bonded?	__ Yes __ No
Have you ever pled “guilty” or “no contest” to or been convicted of a crime?	__ Yes __ No
If yes, please provide date(s) and details.	

Answering “YES” to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

S K I L L S	Please list any special training or certifications that are job related.					

E D U C A T I O N	Please list your education background starting with the most recent school.					
	School	Number of years completed	Degree/ Diploma	GPA/Class Rank	Major	Minor

ADDITIONAL INFORMATION: In the space provided below, please list special accomplishments, publications, awards, professional, trade, business or civic organizations and any offices held. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, Veteran/Reserve National Guard or any other protected status.

REFERENCES

Please list name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Telephone	Number of Years Known

Please provide any additional information you would like us to consider

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Sub Station II is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the employer's service, whenever discovered.

I expressly authorize, without reservation, Sub Station II, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organization for furnishing such information about me.

I understand that Sub Station II does not unlawfully discriminate in employment and no question on this application issued for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for 90 days. At the conclusion of that time, if I have not heard from Sub Station II and still wish to be considered for employment, it will be necessary to reapply.

If I am hired, I understand that absent a properly executed employment contract, I am free to resign at any time, with or without cause and without prior notice. Sub Station II reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of Illusions 1000 is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the companies president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Do not sign until you have read the above applicant statement.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Applicant's Signature _____

Date ____/____/____