

PREVIOUS EMPLOYMENT

ARE YOU EMPLOYED NOW? YES NO IF YES, MAY WE INQUIRE WITH YOUR PRESENT EMPLOYER? _____

ARE YOU ON LAYOFF AND SUBJECT TO RECALL? _____

DATE EMPLOYED		LAST/CURRENT EMPLOYER	
FROM	TO	DESCRIPTION OF WORK	
		ADDRESS	
		MAY WE CONTACT YOUR PRESENT EMPLOYER & SUPERVISOR?	SUPERVISOR'S NAME PHONE NO.
HOURLY RATE/SALARY		REASON FOR LEAVING? _____	
START	FINAL		

DATE EMPLOYED		EMPLOYER	
FROM	TO	DESCRIPTION OF WORK	
		ADDRESS	
		MAY WE CONTACT YOUR PRESENT EMPLOYER & SUPERVISOR?	SUPERVISOR'S NAME PHONE NO.
HOURLY RATE/SALARY		REASON FOR LEAVING? _____	
START	FINAL		

DATE EMPLOYED		EMPLOYER	
FROM	TO	DESCRIPTION OF WORK	
		ADDRESS	
		MAY WE CONTACT YOUR PRESENT EMPLOYER & SUPERVISOR?	SUPERVISOR'S NAME PHONE NO.
HOURLY RATE/SALARY		REASON FOR LEAVING? _____	
START	FINAL		

ADDITIONAL INFORMATION

DO YOU HAVE ANY PHYSICAL LIMITATIONS WHICH WOULD PRECLUDE YOU FROM PERFORMING THE WORK FOR WHICH YOU ARE BEING CONSIDERED? YES NO

IF YES, PLEASE INDICATE WHAT, IF ANYTHING, CAN BE DONE TO ACCOMMODATE YOUR LIMITATION:

IS THERE ANY OTHER RELEVANT INFORMATION YOU WOULD LIKE TO REVEAL TO US?

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understanding that, if falsified, statements on this application shall be sufficient cause for dismissal.

I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment (except as otherwise noted) and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing the Employee Right to Know Act. I further agree to submit to any legally permissible physical examination that may be required as part of the hiring process or thereafter by the Company (including any comprehensive drug screening, testing and analysis the Company deems appropriate). I further agree to conform to all applicable rules and regulations of the Company.

I understand and agree that, if hired, my employment can be terminated for any reason with or without cause and with or without notice, at any time, at the option of either the Company or myself. I further understand that no store manager or representative of Jet's other than the President of the Company has any authorization whatsoever to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing."

APPLICANT'S SIGNATURE: _____ DATE: _____

APPLICANT: DO NOT WRITE BELOW THIS LINE – FOR USE OF JET'S MANAGEMENT ONLY

EMPLOYMENT REFERENCES VERIFIED #1 #2 #3 PERSONAL REFERENCES CONTACTED #1 #2 #3
 HIRED: YES NO DATE OF OFFER: _____ DATE OF ACCEPTANCE: _____
 POSITION: _____ LOCATION: _____ WAGE: _____ DATE REPORTING: _____
 HIRED BY: _____ IN PERSON VIA PHONE APPROVED BY _____ DATE _____