



### Application for Employment

*\*Questions must be answered in your own handwriting. Complete all questions.*

**NAME** \_\_\_\_\_  
 Last First Middle

**ADDRESS** \_\_\_\_\_  
 Street City State Zip Code

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Also Known As: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Start Date: \_\_\_\_\_

Personal Goals: \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Do you know anyone in our employ? \_\_\_\_\_ Name: \_\_\_\_\_

Referred By: \_\_\_\_\_ Ever Applied Here Before? \_\_\_\_\_ When: \_\_\_\_\_

Part time employees need to work a minimum of 20 hours per week. Do you have any restrictions on hours/days \_\_\_\_\_

Special skills /languages or knowledge: \_\_\_\_\_

How many days did you miss work last year? \_\_\_\_\_ Reasons: \_\_\_\_\_

Have you been convicted of a felony or misdemeanor or released from prison in the past 7 years? \_\_\_\_\_  
 (This information may not prevent you from being hired.) If yes, please explain: \_\_\_\_\_

Will visa or immigration status prevent lawful employment: \_\_\_\_\_

Have you ever been **denied** Workers Compensation? \_\_\_\_\_ How many times? \_\_\_\_\_

When: \_\_\_\_\_ Where: \_\_\_\_\_

**REFERENCES:** (List below the names of three persons not related to you whom you have known at least one year. We prefer references from previous employment)

Name	Relationship	Years Acquainted	Phone
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

In an emergency, contact: \_\_\_\_\_ City/State \_\_\_\_\_ Phone: \_\_\_\_\_

EDUCATION	Name/Location of School	Subjects Studied	Did you graduate/Year?
High School	_____	_____	_____
College	_____	_____	_____
Post Graduate	_____	_____	_____
Trade, Business or Correspondence	_____	_____	_____

Degrees/Certificates Earned: \_\_\_\_\_

**EMPLOYMENT HISTORY** *Begin with your most recent employer. Include all employment for the past 10 years. List any periods and reason for self-employment and/or unemployment. Use additional pages if necessary.*

**Employment Dates (Mo-Yr) to (Mo-Yr)**

**Business Name**

**Job Title**

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

Last Salary: \_\_\_\_\_

Location : \_\_\_\_\_

Experience Learned: \_\_\_\_\_

Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

CHBUSE: Employment Verified: \_\_\_\_\_ Initials: \_\_\_\_\_

**Employment Dates (Mo-Yr) to (Mo-Yr)**

**Business Name**

**Job Title**

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

Last Salary: \_\_\_\_\_

Location : \_\_\_\_\_

Experience Learned: \_\_\_\_\_

Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

CHBUSE: Employment Verified: \_\_\_\_\_ Initials: Employment

**Employment Dates (Mo-Yr) to (Mo-Yr)**

**Business Name**

**Job Title**

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

Last Salary: \_\_\_\_\_

Location : \_\_\_\_\_

Experience Learned: \_\_\_\_\_

Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

CHBUSE: Employment Verified: \_\_\_\_\_ Initials: \_\_\_\_\_

**Employment Dates (Mo-Yr) to (Mo-Yr)**

**Business Name**

**Job Title**

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

Last Salary: \_\_\_\_\_

Location : \_\_\_\_\_

Experience Learned: \_\_\_\_\_

Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

CHBUSE: Employment Verified: \_\_\_\_\_ Initials: \_\_\_\_\_

**Employment Dates (Mo-Yr) to (Mo-Yr)**

**Business Name**

**Job Title**

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

Last Salary: \_\_\_\_\_

Location : \_\_\_\_\_

Experience Learned: \_\_\_\_\_

Telephone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Describe the duties and responsibilities of your most recent job: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you want in a job? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How do you handle conflict? Describe a recent experience that was negative. How did you deal with that situation? What did you do that felt comfortable? What would you do differently? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you know about Changing Hands and/or the position you are applying for?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***THIS COMPANY RESERVES THE RIGHT TO CONDUCT EMPLOYMENT DRUG TESTING.***

I authorize investigation of all statements contained in this application. I understand that any misrepresentation or omission of facts is cause for dismissal. Furthermore, I understand and agree that my employment is for no definite period of time and may, regardless of the date of payment of my wages and salary, be terminated without any previous notice. I understand that this is not a contract between my employer and me.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

*Qualified applicants receive consideration for employment without discrimination because of gender, sexual preference, marital status, race, color, creed, national origin, age, or the presence of a disability.*

**PLEASE HAND-WRITE A LETTER ANSWERING THESE QUESTIONS BELOW AND INCLUDE IT WITH THIS APPLICATION. MAIL OR DELIVER YOUR APPLICATION "ATTENTION: MANAGER" CHANGING HANDS BOOKSTORE 6428 S. MCCLINTOCK DR. TEMPE, AZ 85283**

- **Why do you think books matter?**
- **What are your favorite books? Films? Music?**
- **Tell us how you feel you can best contribute to Changing Hands and the reasons we need to choose you over our other candidates**