## **Employment Application**



Other names under which

### **Application for Employment**

Costa's Cash Express is an Equal Opportunity Educational Institution and EEO/Affirmative Action Employer committed to excellence through diversity. Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

<u>PLEASE TYPE OR PRINT</u>. Complete the entire application. You may attach a resume, but you must still complete all questions; or your application will be deemed incomplete and may not be considered. Please fill out each box (don't just indicate "See Resume.") Applications with missing or invalid job numbers will not be considered for any position.

Name (Last, First, Middle):

Applying For:						n have attended en employed:	school or	
JOB #:			_					
Street Address:			City,	State & Zip:				
Social Security Number: Home		Home Phone:		Work Phone:		Other Phone:		
Are you eligible to v States?	work in the Uni	ted Yes	No					
Are you 18 years of age or older?		Yes	No	If NO, what is your current age?				
Are you currently employed at (company)?		Yes	No	If YES, what is your current job title & departme		artment?		
Have you ever been employed by (company)?		☐ Yes ☐	No If YES, dates of employment & reason for lea		eaving:			
Are you related to any current (company employee)?		☐Yes ☐	Yes No		If YES, their name & their relationship to you?			
If required for position, do you have a valid driver's license?		re a Yes	] No	No If YES, State of issuance, license #, and expiradate:		oiration		
How did you learn a  Job Bulletin (Pos			at ept. of	? Check all the	nat apply:	Ad in <i>newspa</i>	•	
Referral by emp			<b>ср</b> і. 01	Laboi		Ad in <i>magazir</i>	<i>1е</i>	
Referral by emp		:					1e 	
Referral by emp	loyee Other	: Did yo	ou	If No, # of years left to	If Yes, date of Graduation	e Degree received	Major	
Referral by emp	loyee Other	: Did yo	ou	If No, # of		e Degree received		
Referral by emp	loyee Other	: Did yo	ou ate?	If No, # of years left to	of	e Degree received		
Referral by emp.  EDUCATION  Name of School  High School:	loyee Other	State Did you gradua	ou ate?	If No, # of years left to	of	e Degree received		
Referral by emp.  EDUCATION  Name of School  High School:  GED:	loyee Other	State Did yo gradua  Yes  Yes	ou nte?  No No	If No, # of years left to	of	e Degree received		
Referral by emp.  EDUCATION  Name of School  High School:  GED:  Other School:	loyee Other	State Did you gradua  Yes  Yes  Yes  Yes	ou nte?  No No	If No, # of years left to	of	e Degree received		
Referral by emp.  EDUCATION  Name of School  High School:  GED:  Other School:  College:	loyee Other	State Did yes The state State Pres The state Pres T	ou ate?  No No No	If No, # of years left to	of	e Degree received		

# **Employment Application**

Year:
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RK EXPERIENCE-Please de	tail your entire work history Regin with	your <u>current</u> or most recent employer. If yo
		Attach additional sheets if necessary. Om
rior employment may be consid	ered falsification of information. Please	explain any gaps in employment. Include ful
	PLEASE DO NOT complete this infor	
EASE NOTE: Costa's Cash Exrmation.	xpress reserves the right to contact all cur	rent and former employers for reference
imation.		
Dates Employed (most recent		Title:
position)	Full time Part-time	
From: To	If part time # hrs /wks	
Starting Salary:	If part-time, # hrs./wk:  Organization Name and Address:	
runting Sulary.	Organization Ivalle and Ivadicess.	
Final Salary:		
Supervisor's Name, Title and	Other Reference Name, Title and	Contact my current references:
Phone #:	Phone #:	☐ At any time ☐ Only if I am a finalist candidate
		Only II I am a mianst candidate
Primary duties:		Reason for Leaving:
•		
Datas Employed (most magnet		Title:
Dates Employed (most recent position)	Full time Part-time	Title:
From: To		
	If part-time, # hrs./wk:	
Starting Salary:	Organization Name and Address:	
7. 10.1		
Final Salary:		
Supervisor's Name, Title and	Other Reference Name, Title and	Contact my current references:
Phone #:	Phone #:	At any time
		Only if I am a finalist candidate
	1	1
rimary duties:		Reason for Leaving:

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#### PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Costa's Cash Express to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Costa's Cash Express serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the Costa's Cash Express Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a provisional period, during which I would not be eligible to ap

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Applicant Signature:	 Date: