

OLLIE KOALA'S BACKYARD

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. All applicants are considered for employment based upon their qualifications, without regard to race, color, religion, sex, national origin, age, disability, citizenship, or veteran status.

Date of Application:

INTRODUCTORY INFORMATION					
NAME	Last Name	First Name	Middle Initial	SOCIAL SECURITY NO. - -	
PRESENT ADDRESS	Number Street	City	State	Zip	TELEPHONE () -
PERMANENT ADDRESS	Number Street	City	State	Zip	TELEPHONE () -
Are you a U.S. citizen or an alien authorized to work in the U.S.?			If you are less than 19 years old, state your age:		
~ Yes ~ No					

EMPLOYMENT DESIRED		
Position Desired	Date You Can Start Work	Salary Desired
Are you available for full-time work? ~ Yes ~ No	Are you willing to travel? ~ Yes ~ No	
Are you available for part-time work? ~ Yes ~ No	Are you willing to relocate? ~ Yes ~ No	
Are you willing to work on on-call basis? ~ Yes ~ No		
Can you work each day of the week? ~ Yes ~ No		
If no, what days are you available?		
Are you currently on lay-off or inactive status with any employer or other organization and subject to being recalled to work or given assignment by that employer or organization?		
No		
If yes, state the approximate date you anticipate being recalled to work or given a work assignment:		
Do you know anyone who works here? ~ Yes ~ No	How were you referred to the Company?	
If yes, who?		

EDUCATION AND TRAINING						
Name and Location of School Attended	Higher Grad Attended	Did You Graduate	Degree(s) Earned	Areas of Study	Job-Related Courses Acquired	
ELEMENTARY AND MIDDLE SCHOOL						
COLLEGE AND GRADUATE SCHOOL						
TRADE OR TECHNICAL SCHOOL						

Have you ever served in the United States Armed Forces? ~ Yes ~ No
 If yes, state the branch in which you served and list any job-related skills you acquired or duties you performed:

MISCELLANEOUS INFORMATION	
SPECIAL SKILLS	To the extent you have not already done so earlier in this application, summarize any special skills or qualifications you have which relate to the position for which you are applying:
CRIMINAL RECORD	Have you ever been convicted of a crime, other than a minor traffic offense? ~ Yes ~ No If yes, explain: <i>A RECORD OF A CRIMINAL CONVICTION DOES NOT NECESSARILY SERVE AS A BAR TO EMPLOYMENT</i>

REFERENCES			
PLEASE PROVIDE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST 1 YEAR			
NAME	ADDRESS/PHONE	BUSINESS	YEARS KNOWN

EMPLOYMENT HISTORY

PRESENT OR LAST EMPLOYER

Name Address City, State, Zip Phone	Nature of Business	Date Hired	Date Left
Starting Position	Final Position	Starting Pay	Final Pay
Description of Work and Responsibilities	Name and Title of Immediate Supervisor	Reason for Leaving	

If you are still employed, may we contact this employer at this time? ~ Yes ~ No
If no, explain:

Name Address City, State, Zip Phone	Nature of Business	Date Hired	Date Left
Starting Position	Final Position	Starting Pay	Final Pay
Description of Work and Responsibilities	Name and Title of Immediate Supervisor	Reason for Leaving	

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Description of Work and Responsibilities	Name and Title of Immediate Supervisor	Reason for Leaving	

PLEASE CONTINUE LISTING OTHER EMPLOYMENT ON SEPARATE PAGE

Have you ever been employed under a different name? ~ Yes ~ No
If yes, state the name and by whom you were employed when you used it:

Are you currently subject to an agreement with any employer under which you have agreed not to work for a competitor of that employer or solicit clients or customers of that employer? ~ Yes ~ No If yes, explain:

Have you ever been discharged or asked to resign by an employer? ~ Yes ~ No
If yes, explain:

Except for vacations, holidays, and periods during which you were disabled or seeking treatment for a disability, how many days were absent from work in the last 12 months?

PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY

I certify that all of the information I have supplied on this application is true, accurate and complete to the best of my knowledge, and that I have knowingly withheld any information which, if known to the Company, would affect my application unfavorably. I understand that any false, misleading and/or incomplete statements on this application, and/or in any interview, constitutes grounds for, and will cause, the Company not to employ me, or if I am employed, to terminate my employment.

I authorize an investigation to be conducted concerning all of the information I have supplied on this application, and all other information which the Company deems to be relevant to my qualifications for employment. I further authorize my present employer, my former employers, any educational institution, any law enforcement organization, any consumer reporting agency, any professional or personal reference, or any other appropriate source or individual to provide all information that is requested in connection with such investigation. I release the Company and all named and unnamed sources from any and all liability which may result from furnishing information concerning me.

I agree to take any lawful examination or test, including any drug and/or alcohol test, required by the Company as a condition of my being hired, or if I am hired, as a condition of my continued employment. I further agree that my refusal to take any such lawful examination or test constitutes grounds for, and will cause, the Company not to employ me, or if I am employed, to terminate my employment. I release the Company and all other named and unnamed sources from any and all liability which may result from any lawful examination or test.

If I am employed, I agree that in consideration for my employment, I will conform to the rules and regulations of the Company. I understand that the rules and regulations may be altered, amended or repealed by the Company at any time, at the Company's sole option and without any prior notice to me or my associates.

I acknowledge that if I am employed, my employment and compensation can be terminated at any time, with or without cause or notice, at the option of either the Company or myself. I understand that no representative of the Company has any authority to enter into any agreement for employment for a specified period of time, to assure any benefits or terms and conditions of employment, or to make any agreement contrary to the foregoing, except the President of the Company, who may only do so in writing.

This employment application will be considered active for thirty (30) days from the date it is completed. After that period, a new application must be submitted for an applicant to be reconsidered for a position.

DATE: _____

SIGNATURE: _____