## g

## groove**ground**

## **Employment Application**

Must Be 18 to Apply
Please list availability on back
Date:

**grooveground**, (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

Personal	E	1			1 242 - 1			
Last Name	First		Initial					
Other Name(s) Used						Home Telephone #		
Address					Business or Message #			
Position Applied For		Referred By				Salary Desired		
Are you at least 18 years old?  ® Yes® No		If under 18, do you have			you hav	e a work pe	ermit?	
Education								
Circle Highest Grade Completed:		High School 9 1 College, Trade or Business 1 Graduate Studies		0 11 2 3	12 4 			
School		Address		Ma	ajor Stud	ies	Degree, Diploma, License or Certificate	
High School								
College/University								
Vocational, Business, Other								
List Any Professional Designations								
Other Special Knowledge, Skills or Qualifications								

Computer Skills (Hardware/Software)

<b>Employment Hist</b>	ory						
List all employme completed. You m	nts for the past 10 years, st ay attach a resume, but not in	tarting with the most recent position place of completing the required inform	. All information <b>must</b> be nation.				
Employed From /	Employer Name	Supervisor Name	Starting Salary				
Employed Until	Employer Address	Supervisor Phone #	Ending Salary				
Job Title		Reason for Leaving	Reason for Leaving				
Duties & Responsi	bilities	1					
Employed From	Employer Name	Supervisor Name	Starting Salary				
Employed Until	Employer Address	Supervisor Phone #	Ending Salary				
Job Title		Reason for Leaving	Reason for Leaving				
Duties & Responsi	bilities	'					
Employed From	Employer Name	Supervisor Name	Starting Salary				
Employed Until	Employer Address	Supervisor Phone #	Ending Salary				
Job Title		Reason for Leaving	Reason for Leaving				
Duties & Responsi	bilities	1					
Employed From	Employer Name	Supervisor Name	Starting Salary				
Employed Until	Employer Address	Supervisor Phone #	Ending Salary				

Reason for Leaving

Job Title

Duties & Responsibilities

_						
Genera						
Yes	No	(please check-mark your response)				
		May we contact your current employer for references?				
		If hired, will you be able to work overtime?				
		Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?				
		Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or seals by court? (A "yes" response does not automatically disqualify your application.)				
Cautifica	4:an 0 A					
Certifica	tion & Aut	thorization				
The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.						
	I authorize the Company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize the Company to obtain any credit and consumer check.					
	I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.					
	If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.					
	I hereby acknowledge that I have read and agree to the above statements.					

Date

Signature