

PERSONAL REFERENCES

Give the names of at least 3 persons who can supply information pertinent to your job performance (excluding former employers or relatives)

Name and Occupation	Address	Phone No.
1		
2		
3		
4		
5		

Occasionally a blank application form makes it difficult for an individual to adequately summarize their complete background. To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other consideration.

PLEASE READ CAREFULLY. APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. I also understand that the position that I am applying for requires me to:

- A) Work weekends, evenings and split-shifts..
- B) Occasionally be required on short notice fill in shifts in different locations.
- C) Be physically able to walk a large sales area for an 8 hour shift.
- D) Be physically able to lift fabric bolts weighting approx. 25 lbs and be able to roll and fold fabrics for an 8 hour shift.
- E) Declared that I do not have any pre-existing medical condition(s) that would hinder the job performance. Should there be any medical condition(s) that has not been resolved completely within the last 6 months, I agreed to provide a medical certificate from my attending doctor certifying that I am physically able to work.

Signature of Applicant

Date