



APPLICATION FOR EMPLOYMENT

DAVIS

Please complete entire application to ensure processing.

PERSONAL INFORMATION (Please print)			Social Security Number
Name	Last	First	Middle
Are you legally eligible for employment in the U.S.? (All new hires will be required to provide proof of eligibility to work in the U.S.) Yes No		Have you been convicted of a crime in the last seven (7) years? Yes No If Yes, list convictions that are a matter of public record (arrests are not convictions). A conviction will not necessarily disqualify you for employment.	
Address	Street	City	State/Province Zip Code/Postal Code
Phone Number	Email Address	Referred By	

EMPLOYMENT DESIRED (if you are applying for a retail hourly position, please keep in mind that the availability of hours may vary.)							
Position	Location/Department	Salary Desired	Date You Can Start				
Specify hours available for each day of the week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Are you able to work overtime?	If yes, when?						
Have you ever worked for a Fleet Feet Sports store?	If yes, when?		Which store/department?				

EDUCATION	Name and Address of School	Years Completed. Did You Graduate?	Subjects Studied and Degrees Received
High School			
College			
Post College			
Trade, Business, or Correspondence School			

List skills relevant to the position applied for:

Back office skills: (include Computer Proficiency - Word for Windows, Excel, others)

Have you ever visited a Fleet Feet Sports location? Where? Describe your experience:

Why would you like to work for Fleet Feet Sports in Davis?

Describe a specific situation where you have provided excellent customer service in your most recent position. Why was this effective?

FORMER EMPLOYERS List below current and last three employers, starting with most recent one first. Please include any non-paid/volunteer experience which is related to the job for which you are applying. Please complete even if you attach a resume.

Date (M/D/Y)

From	Current Employer (Name and Address of Employer - Type of Business)	<u>Salary Or Hourly</u> Starting: Ending: If hourly, average # of hours per week:	Position	Reason For Leaving
To				
Duties Performed:				
Supervisor's Name:		Phone Number:		May We Contact?

From	Current Employer (Name and Address of Employer - Type of Business)	<u>Salary Or Hourly</u> Starting: Ending: If hourly, average # of hours per week:	Position	Reason For Leaving
To				
Duties Performed:				
Supervisor's Name:		Phone Number:		May We Contact?

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To				
Duties Performed:				
Supervisor's Name:		Phone Number:		May We Contact?

REFERENCES Give below the names of three professional references, whom you have known at least one year.

Name	Address & Phone Number	Business	Years Acquainted. How do you know this person?

I hereby authorize Fleet Feet Sports to thoroughly investigate my background, references, employment record and other matters related to my suitability for employment. I authorize persons, schools, my current employer (if applicable), and previous employers and organizations contacted by Fleet Feet Sports to provide any relevant information regarding my current and/or previous employment and I release all persons, schools, employers of any and all claims for providing such information. I understand that misrepresentation or omission of facts may result in rejection of this application, or if hired, discipline up to and including dismissal. I understand that I may be required to sign a confidentiality and/or non-compete agreement, should I become an employee of Fleet Feet Sports I understand that nothing contained in this application, or conveyed during any interview which may be granted, is intended to create an employment contract. I understand that filling out this form does not indicate there is a position open and does not obligate Fleet Feet Sports to hire me.

I understand and agree that my employment is at will, which means that it is for no specified period and may be terminated by me or Fleet Feet Sports at any time without prior notice for any reason.

Date _____ Signature _____