



Good's Furniture House, INC.

An Equal Opportunity Employer

1. You must fully and accurately complete this Application for Employment. Incomplete applications will not be considered.
2. This Application for Employment will be inactive after 90 days. If you want to be considered after that time, you must complete a new Application for Employment.

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Present Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Prior Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone Number: _____ Referred By: _____

____ YES ____ NO If you are hired, can you supply proof of your age?

____ Yes ____ NO If you are hired, can you supply the required documentation to verify your lawful right to work in the United States Of America.

Position Desired: _____

Date You Can Start: _____ Desired Salary: \$ _____

____ YES ____ NO Are you employed now? If so, may we inquire of your present employer? ____ YES ____ NO

____ YES ____ NO Have you ever been employed by this company before? If so, when: _____

Please describe your interest in the position you desire and describe the skills and aptitudes that you feel qualify you for the position?

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Trade School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Current + Past Employment - Please list most recent first.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Current + Past Employment - Continued.

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Disclaimer and Signature

I certify that that all facts contained in this application are true and complete to the best of my knowledge. I understand that omission or misrepresentation of facts may be grounds for rejection of this application or for dismissal from employment if subsequently discovered.

I authorize investigation of all statements contained herein and of the references listed above to give you any and all information concerning my previous employment and any pertinent information, personal or otherwise. I release all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that, if hired, my employment is for no definite period, and regardless of the date of payment of my wages or salary, I may be terminated at any time with or without cause or prior notice. I further understand that only the employer's president or another person specifically designated by the employer's president has the authority to create or enter into any employment agreement on behalf of the employer.

In consideration of my employment, I agree to comply with all current and future rules, regulations, and employment policies of the employer.

Signature: _____ Date: _____