

rehabilitation will be considered.)

Primitives by Kathy, Inc. is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

Personal Information	n:		
Name:	Date:		
Address:	City		
State Zip Code	Phone Number	Cell Number	
Email Address:	ress: Position sought:		
Fulltime Part Tir	me Date available for work	Salary desired	
Hours you are availal	ble to work?		
Are you at least 18 ye work.) Yes No_	ears or older? (If no, you may be requin	red to provide authorization to	
	le for employment in the United States Il be required to provide documentation	,	
Referral Source: Please	_{e circle one} Advertisement Friend Relat	tive Walk-In Employment Agency	
Employee Referral (n	name of employee) Other	
Have you ever worke	ed for this company before? Yes No E	Explain	
Do you know anyone	e who works for our company? Yes No	o If yes, who?	
-	cted of a crime other than a minor tra		
	necessarily disqualify an applicant fro		
•	, date of conviction, seriousness and n	· ·	

Education: High School _____ Graduated ___ Yes ___No or GED College or University Years attended Degree received Major _____ Trade, Business or Correspondence School **Employment History:** Please list past employers starting with current or most recent employer. Employer______Phone_____ Dates Employed From: ______ To: _____ Job Title_____ Work performed: Supervisor: _____ Starting Salary ____ Final salary____ Reason for leaving: _____ May we contact this employer? Yes No Employer______Phone_____ Dates Employed From: To: Job Title Work performed:_____ Supervisor: _____ Starting Salary ____ Final salary____ Reason for leaving: _____ May we contact this employer? _____Yes _____No

Employer	Phone_		
Address			
Dates Employed From:	To:	Job Title	
Work			
performed:			
		Final salary	
Reason for leaving:			
May we contact this employer? _			
E valores	Dhara		
Employer	Pnone_		
Address			
Dates Employed From:	To:	Job Title	
Work performed:			
Supervisor:	Starting Salary	Final salary	
Reason for leaving:			
May we contact this employer? _	YesNo		
Special Skills and			
Qualifications			

Professional References:
1. Name
Address
Phone
2. Name
Address
Phone
Please read carefully before signing:
Primitives by Kathy, Inc. (PBK), is an equal opportunity employer. PBK does not discriminate on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.
I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for PBK to hire me. If I am hired, I understand that either PBK or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of PBK has the authority to make any assurances to the contrary.
I attest with my signature below that I have given to PBK true and complete information on this application. No requested information has been concealed. I authorize PBK to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.
In connection with my application for employment (including contract for services) with you, I understand that investigative background inquiries may be made on myself which may include consumer, criminal, driving, urine drug screening and other reports. These reports may include information as to my character, work habits, performance and experience. Further, I understand that you may be requesting information from various federal, state and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, worker's compensation and other experiences as well as claims involving me in the files of insurance companies.
I authorize, without reservation, any party or agency contacted by this employer to furnish the above mentioned information.
I understand that if offered employment, it is necessary to abide by the rules and policies of PBK and that I will be on a three month probationary period before being considered a regular employee.
Print Full Name
Signature of applicant Date