Markus Supply Ace Hardware

Phone 510-832-6532

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Fax 510-832-6535

Employment Application

An Equal Opportunity Employer

INSTRUCTIONS: If you need help to fill out this application form or for any phase of the employment process, please notify the person that gave you this form and every effort will be made to accommodate your needs in a reasonable amount of time. You must complete this form yourself. Answer all questions. This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the applicant process or, if discovered after employment, terminating employment. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of disabilities. As part of our procedures in processing applications for employment, your application and the information you provide in it will be subject to an investigation by a consumer credit reporting agency. That investigation may cover various aspects of your background, including but not necessarily limited to criminal convictions, verification of education, general reputation, and other factors bearing on your suitability for employment. The process may include interviews with individuals who you provide as references as well as other persons, motor vehicle driving records, reference checks, and investigations into possible instances of theft, fraud, harassment and workplace violence. If you are employed by our Company, investigations of this type may be conducted for bona fide employment purposes, including but not limited to reassignment, promotion, retention and rehiring. A felony conviction will not necessarily bar an applicant from employment. Affirmative action hiring may be requested by qualified applicants. Additional testing of job-related skills and for the presence of drugs in your body may be required prior to employment. After an offer of employment, and prior to r

PLEASE PRINT

name		Date	
LAST,	FIRST	MI	
Phone Number	Social Security Number		
Present Address			
	IBER & STREET, CITY, STATE, ZIP		
Permanent Address	IF DIFFERENT FROM PRESENT ARE	DRESS	
	IF DIFFERENT FROM FRESENT ADD	DRESS	
EMPLOYMENT DESIRED			
		Did you read and sign the	
Position applied for		attached job description? YES NO	
You are applying for:			
Regular Full- time Work_	Regular Part-ti	ime work Temporary work	
lf		1-0	
if applying for temporary v	work, when are you availab	le?	
Standard store hours are	Mon Fri SAM 6DM / Sat	: 9AM - 5PM / Sun 10:30AM - 4:30PM.	
	its, if any, are you <u>not</u> availa	·	
whiat days, nours and sim	ts, ii aliy, are you <u>not</u> availa	ADIC TOT WOLK:	
Are you available for work	outside	Would you be able to	
of your regular work sche	dule? YES NO	work overtime? YES NO	
If hired, on what date			
can you start work?		Wage/Salary desired	
Are you currently		May this Company contact	
employed? YES	NO	your present employer? YES NO	
Are you currently on "layo	ff "	If yes, name	
status subject to recall?		of Employer	
status subject to recall:	15		

PERSONAL INFORMATION Have you ever applied to or worked for this Compa	ny hoforo?	VEC A	
Have you ever applied to or worked for this Compa	YES N	10	
If yes, when?	Under what name?		
Do you have any friends or relatives working for th	YESN	10	
If yes, state name(s) & relationship(s)			
If hired, would you have a reliable means of transpecify		YES N	
Are you at least 18 years old? YES NO	(If under 18, an off verification that yo		
If hired, can you present evidence to verify your legal right to live and work in this country?	YES NO		
If you had any questions about the essential funct of the job, were you given satisfactory answers?	yes No		
Can you perform the requirements of this job with or without reasonable accommodation?	YES NO		
If yes, describe the conditions and the nature of you the essential functions of the job		odations, if any,	required to perform
EDUCATION, TRAINING & EXPERIENCE			
Name & Address	# of Years Completed	Did you graduate?	Degree or Diploma
High School			
College/University			
Business/Voc.			
Other School			
Answer the following questions if you are applying for a	position which requires a license	to perform the jo	ob.
Are you licensed/certified for the job applied for?		YES_	NO
Type of license/certification	State	Number	
Has your license/certification ever been revoked of lf yes, state reason(s), date of revocation or suspe	-		NO
in you, state reason(e), date or revocation or suspe	sion and date of remistaterne		

If yes, indicate type of violations, date and place				
EMPLOYMENT HISTORY List below all present and past employers, starting with your n	nost recent employer	'. (Last 10 years	is sufficient.)	
Name of Employer	Phone ()		
Address	Dates Employed	From		
		То		
Supervisor's Name	Type of Business			
Your Position/Job Title	Wage/	Starting	HR/WK/MO	
Your duties	Salary ——	Ending	HR/WK/MO	
	Reason for Leaving			
Name of Employer	Phone ()		
Address		From		
	Employed 	То		
Supervisor's Name	Type of Busi	ness		
Your Position/Job Title	Wage/	Starting	HR/WK/MO	
Your duties	Salary ——	Ending	HR/WK/MO	
_/	Reason for I	Leaving		
List additional employers on an extra page if necessary.				
MILITARY SERVICE				
Have you served or are you presently serving in the United States Armed Forces? YES NO				
If yes, which branch? Length of Service				
Rank: Upon Entrance At Discharge				
List service schools attended				

REFERENCES

List below four persons you have known at least one year. Do not list relatives or former employers.

Name	Phone ()
Address	Occupation
	# Years Acquainted
Name	Phone ()
Address	Occupation
	# Years Acquainted
Name	Phone ()
Address	Occupation
	# Years Acquainted

ALL APPLICANTS MUST READ & SIGN BELOW

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any false information, omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Company and its agents including consumer reporting agencies, to thoroughly investigate my references, work record, education and other matters related to my suitability for employment. I have been given a Notice and Disclosure explaining that reports of such investigations may include information concerning my creditworthiness, character, general reputation, personal characteristics, criminal background, education and other information and that the information may be obtained from personal interviews of my references and any other persons. I authorize my former employers, schools, companies, law enforcement authorities and other persons to disclose to the Company any and all letters, documents, records, reports and other information related to my background and my work records, without providing me with prior notice of such disclosure, and agree that I will have the right to know of that information or reports only to the extent required by law. I understand that the Company and its agents are not responsible for the accuracy or completeness of the information provided to it and as may be contained in such reports. I release the Company and its agents, as well as my former employers and all other persons, corporations, business entities, partnerships and associations from any and all liability, claims and lawsuits with respect to the information obtained from any or all of the sources used by the Company to obtain the information. I understand that this authorization is not an offer of employment nor, if I am hired, of continued employment by the Company.

I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the Company, except to the extent that my employment with the Company is "at-will" as set forth below.

I also understand that the illegal use of drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs at any time prior to and during employment.

In addition, I understand and agree that if I am employed, my employment is "at-will", which means it is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing were made or are binding on the Company unless made in writing and signed by me and the Company's President or the designated representative of the President.

APPLICANT'S SIGNATURE	DATE SIGNED

My driving record may be checked with the Department of Motor Vehicles, State of California.

Applicant Profile/Employment Screen

Applicant: Complete the following information	n as accurately a	s possible. (Please p	orint clearly.)		
Name (Last, First, MI):					
DL#:S	State:	Exp Date:	SSN		
Previous Names (maiden/marriage/etc):			Date Chan	ged:	
-			Date Chan	ged:	
Address:			Dates:		
Telephone Number:			Length of t	time living in California:	
Previous Address:			Dates:		
Previous Address:			Dates:		
Have you ever been convicted of a crime, exclude	ding minor traffi	c violations?	Yes	No	
(NOTE: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered. Background investigations will be conducted on all new employees. If yes, please list all criminal convictions, including but not limited to, Felonies and Misdemeanors:					
of this authorization may serve as an original. Signature:			Date:		
	OFFI	CE USE ONLY			
Criminal Conviction Search Notes:		t Verification	Referer	nce Check	