



**EMPLOYMENT EXPERIENCE:**

Place an  by the employer(s) you do not want us to contact. List your most recent employer first. You may include any verified work performed on a volunteer basis:

Employer \_\_\_\_\_  
Address: \_\_\_\_\_  
                    Street                                    City                                    State                                    Zip  
Phone: (    ) \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Date employed from \_\_\_\_\_ to \_\_\_\_\_ Hrly rate/salary: Starting \_\_\_\_\_  
                                    mo./yr.                    mo./yr.                                    Final \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Employer \_\_\_\_\_  
Address: \_\_\_\_\_  
                    Street                                    City                                    State                                    Zip  
Phone: (    ) \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Date employed from \_\_\_\_\_ to \_\_\_\_\_ Hrly rate/salary: Starting \_\_\_\_\_  
                                    mo./yr.                    mo./yr.                                    Final \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer \_\_\_\_\_  
Address: \_\_\_\_\_  
                    Street                                    City                                    State                                    Zip  
Phone: (    ) \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Date employed from \_\_\_\_\_ to \_\_\_\_\_ Hrly rate/salary: Starting \_\_\_\_\_  
                                    mo./yr.                    mo./yr.                                    Final \_\_\_\_\_  
Work Performed: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

U.S. Military Service      Yes       No       Branch \_\_\_\_\_

Courses and training other than shown elsewhere in this application \_\_\_\_\_  
\_\_\_\_\_

Special Equipment or Technical Materials you can work with \_\_\_\_\_

**EDUCATION:**

| Level       | Name and Location of School | Did you graduate? |
|-------------|-----------------------------|-------------------|
| High School | _____                       | _____             |
| College     | _____                       | _____             |
| Other       | _____                       | _____             |

Subject of special study or research? \_\_\_\_\_

**WORK REFERENCES:** Give the names of three persons not related to you.

|    | Name  | Telephone No. | How known?<br>(Supervisor, etc.) |
|----|-------|---------------|----------------------------------|
| 1. | _____ | _____         | _____                            |
| 2. | _____ | _____         | _____                            |
| 3. | _____ | _____         | _____                            |

**GENERAL:**

Are you available to work: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

On what date would you be available for work: \_\_\_\_\_

Do you have any relative(s) employed with LINEN WAREHOUSE? Yes  No

If Yes, list name(s): \_\_\_\_\_

Are there any reasons why you would not consistently arrive for work on time and work according to the company's schedule? No  Yes  If Yes, explain \_\_\_\_\_

Do you have any obligations which would prevent you from working overtime? No  Yes  If yes, explain \_\_\_\_\_

Are you employed now? No  Yes

Are you on lay-off and subject to recall? No  Yes

Please state any information you feel may be helpful to us in considering your application

\_\_\_\_\_  
\_\_\_\_\_

## *Authorization*

I promise that all information I have supplied in this application and any other form, oral or written, is true and accurate, and I agree that any misstated, misleading, or incomplete, or false information will result in rejection of this application form, refusal to hire, withdrawal of an offer of employment or immediate discharge without recourse, whenever and however discovered.

I understand and agree that LINEN WAREHOUSE, any agent acting on its behalf, as well as any other person responding to a reference request pursuant to this application, can and will see and/or disclose any and all information about me which said corporation, agent, or person may have. I specifically authorize said disclosure and agree to hold all such corporations, agents, or persons harmless.

I understand and agree with the fact that LINEN WAREHOUSE maintains a drug-free workplace and that I will be required to undergo a post-offer drug screening and medical examination designed to ascertain my suitability for employment.

If hired, I agree to abide by the terms and conditions of all LINEN WAREHOUSE rules and regulations. I understand and agree that my employment will be at will and that I or LINEN WAREHOUSE may terminate this employment relationship at any time, with or without notice, for any or no reason, without recourse by either of us. I also understand that oral representation to the contrary do not change the fact that both the Company and I remain free to end the work relationship for any or no reason. I further understand that any changes in this employment relationship must be made in writing.

I acknowledge that I have been advised that LINEN WAREHOUSE is an Equal Opportunity/Affirmative Action Employer and that LINEN WAREHOUSE administers its employment policies in a nondiscriminatory manner. I specifically authorize LINEN WAREHOUSE to investigate my background, including any and all references, consistent with the position for which I am applying, and release and hold LINEN WAREHOUSE harmless for any and all liabilities arising out of its investigation of my application for employment. I authorize the Company, in its sole discretion, to supply my employment record to any prospective employer, government agency, or other party with an interest that the Company deems appropriate.

In the event of employment, I understand that false or misleading information given in my application, resume or interview(s) may result in discharge. I understand, also that I am required to abide by all policies, procedures, rules and regulations of the Company

Applicants are considered for all position and employees are treated during employment, without regard to race, color, religion, sex, national origin, age, marital status, veteran status, the presence of non-job related medical conditions, handicap or sexual orientation.

I understand that this application is not a contract of employment.

Applicants Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**"A DRUG-FREE WORKPLACE"**