



Date of Application: _____

Position Applied For: _____

How Did You Learn About This Position? Web Site

Walk-In Friend/Relative Employment Agency _____

Advertisement _____ Other _____

PERSONAL INFORMATION

Name: _____
Last Middle First

Address: _____
Number/Street/Apartment City State Zip Code

Telephone: _____ Email: _____

If you are under 18, can you furnish a work permit? Yes No

Are you legally authorized to work in the United States? Yes No

(Proof of eligibility will be required upon employment)

Have you been convicted of a felony within the last 7 years? Yes No

If yes, please explain: (A conviction will not necessarily disqualify you from employment.)

Have you ever been employed by us or another Ace Hardware retailer? Yes No

If yes, when: _____ Where: _____

Do you have any relatives employed by our company? Yes No

If yes, when: _____ Where: _____

AVAILABILITY

Date you are available to work: _____

Do you wish to work: Full-Time Part-Time Temporary

If temporary, specify dates available: _____

Please indicate hours you are available to work each day: (example 7am – 9pm)

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Wages desired: \$_____ per _____ Hours per week: _____

Can you travel if your job requires it? Yes No

SKILLS & EXPERIENCE

(Check all that apply)

Electrical

Blade Sharpening

Plumbing

Screen Repair

Paint Mixing Machine

Point-of-Sale Terminal / Cashier

Building Construction

Microsoft Word

Key Cutting Machine

Microsoft Excel

Lock Servicing

Intuit Quickbooks

Fluency in Foreign Languages: _____

List any other relevant qualifications you have that can be a benefit in this position:



PLEASE PRINT

EDUCATION				
	Name and Location	Years Completed	Degree?	Major
High School				
College				
Grad School				
Other				

EMPLOYMENT HISTORY				
Give names and addresses of all previous employers. If you are now working, your present employer and reason you want to leave must be included. Additional sheets may be attached if required. Please give reason for any lapse of time between jobs.				
May we contact your present employer?				<input type="checkbox"/> Yes <input type="checkbox"/> No
Employer (Latest first)	Dates Employed	Salary History	Position and Duties	Reason for Leaving
Name:	From:	Start:		
Address (City/State/Zip):	To:	Final:		
Telephone: Supervisor:				
Name:	From:	Start:		
Address (City/State/Zip):	To:	Final:		
Telephone: Supervisor:				
Name:	From:	Start:		
Address (City/State/Zip):	To:	Final:		
Telephone: Supervisor:				
Name:	From:	Start:		
Address (City/State/Zip):	To:	Final:		
Telephone: Supervisor:				
Additional sheets attached?				<input type="checkbox"/> Yes <input type="checkbox"/> No

REFERENCES		
Please list 3 professional references (not related to you) with contact information.		
Name:	Phone number:	Email:
How do you know this person?		Years acquainted?
Name:	Phone number:	Email:
How do you know this person?		Years acquainted?
Name:	Phone number:	Email:
How do you know this person?		Years acquainted?

