



# Warm Glow Candle Company Application for Employment



We are an equal opportunity employer and do not discriminate on the basis of an applicant's race, color, religion, sex, national origin or age

## PERSONAL INFORMATION

Name (Last, First, Middle): \_\_\_\_\_ Date: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Can you prove your U.S. Citizenship? Circle one:    Yes                                  No

If not a U.S. Citizen, give Visa No. and Expiration Date: \_\_\_\_\_

Position You are Applying For? \_\_\_\_\_ Date You Can Start: \_\_\_\_\_

Are you available to work:    Full Time    or    Part Time

Have you been convicted of a felony in the past 7 years? \_\_\_\_\_ Explain: \_\_\_\_\_

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

## WORK HISTORY (GIVE INFORMATION ABOUT YOUR LAST 3 JOBS, STARTING WITH THE MOST RECENT)

1-Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Title/Duties: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

2-Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Title/Duties: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

3-Employer: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Title/Duties: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

Do you know anyone who is employed by this company? \_\_\_\_\_ Who? \_\_\_\_\_

If presently employed may we contact your current employer? \_\_\_\_\_

Are you a veteran of the U.S. Military? \_\_\_\_\_

Please list any extended schooling or training: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**BUSINESS REFERENCES (IF APPLYING FOR YOUR FIRST JOB, YOU MAY USE ACADEMIC REFERENCES)**

1-Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship to You: \_\_\_\_\_

2-Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship to You: \_\_\_\_\_

3-Name: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship to You: \_\_\_\_\_

**In the event of an emergency, Whom should we contact?**

Name : \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

I hereby certify that the information contained in this application and in any attachments following, is true and correct to the best of my knowledge. I agree to have any of the statements checked by Warm Glow Candle Company unless I have indicated to the contrary. I authorize the references listed above to provide Warm Glow Candle Company any and all information concerning my previous employment and any pertinent information that they may have. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive employment or if hired, dismissal from employment.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_