

Application for Employment

Station Enterprises, Inc. (Tree Town Toys)
 2611 Plymouth Road
 Ann Arbor, MI 48105
 (734) 929-6545

This Company is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.

Personal		
Last Name, First, Middle Initial		Primary Phone # ()
Address		Other Phone # ()
Position Applied For		Email
Have you reviewed the job description? " Yes" No	Referred By	Desired Pay
Have you ever interviewed with the Company or its affiliates before? " Yes" No	If yes, list date(s), job title(s) & location(s)	
Have you ever been employed by the Company or its affiliates before? " Yes" No	If yes, list date(s), job title(s) & location(s)	
Are you at least 18 years old?" Yes" No	If under 18, do you have a work permit?	
<u>Company Use Only</u>		
<div style="text-align: right;">Notes:</div> Date Received:		
Received by:		

Education			
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Have you completed High School? " Yes " No If No, do you have a GED? " Yes " No
 College Year Completed (circle one): 1 2 3 4 , Graduate Studies, Post-Graduate
 Are you currently enrolled? " Yes " No If Yes, what is your expected graduation date?

School	Address	Major Studies	Degree or Diploma
High School			
College/University			
Other			

List Any Professional Designations:

Other Special Knowledge, Skills or Qualifications:

Languages other than English (Basic or Proficient):

Do you use a computer on a regular basis? " Yes " No
 Have you used a Point of Sale program? " Yes " No If Yes, which one?
 List Hardware and Software you have are proficient at using:

Employment History

List your past 4 employments, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing this form.

Employed From	Employer Name	Supervisor Name	Starting Pay
Employed Until	Employer Address	Supervisor Phone #	Ending Pay
Job Title		Reason for Leaving	

Duties & Responsibilities

Employed From	Employer Name	Supervisor Name	Starting Pay
Employed Until	Employer Address	Supervisor Phone #	Ending Pay
Job Title		Reason for Leaving	

Duties & Responsibilities

Employment History (Continued)

List your past 4 employments, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing this form.

Employed From	Employer Name	Supervisor Name	Starting Pay
Employed Until	Employer Address	Supervisor Phone #	Ending Pay
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Duties & Responsibilities			
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Employed Until	Employer Address	Supervisor Phone #	Ending Pay
Job Title		Reason for Leaving	
Duties & Responsibilities			

Schedule Availability

Fill in your availability below. Please fill in *all times* you are *available* to work, noting that this is not a requested schedule. Our regular store hours vary seasonally and you may be required to attend special events and staff meetings off regular store hours.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Desired Hours

Circle the number of hours desired:

12 – 20 Hours

20 – 30 Hours

30 – 40 Hours

Please provide any other notes relevant to your schedule and availability. If you are enrolled in an educational program, intend to remain employed elsewhere, plan for an extended time off, or have other *committed* schedule times, please note these below:

General

Yes No

- "" May we contact your current employer for references?
- "" If hired, will you be able to work overtime?
- "" Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?
- "" Have you ever been convicted of any crime, (excluding convictions for marijuana related offenses for personal use more than two years old, convictions that have been sealed, expunged or legally eradicated, or misdemeanors for which probation was completed and the case was dismissed by court). Note: A Yes response does not automatically disqualify your application.) If Yes, please explain.

"" Are you currently out on bail or released on your own recognizance pending trial? If yes, please explain.

Certification & Authorization

The above information is true and correct. I understand that the hiring process will be terminated, or in the event of my employment by the Company, I shall be subject to dismissal, if any information that I have given in this application, the background release form, in any resume or interview or any part of the hiring process is false or misleading or if I have failed to give any information herein requested, or if I have withheld relevant information, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

Signature _____

Date