

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

ARE YOU 16 YEARS OF AGE OR OLDER?

If YES, Please complete the employment application.

If NO, Please do not complete this employment application. DCC does not hire associates under 16 years of age.

DCC prohibits discrimination in employment because of race, color, sex, religion, age, national origin, disability, citizenship status, sexual orientation, sexual identity, participation in military service or any other unlawful basis in accordance with all applicable federal, state and local laws.

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Name																	
		Last			First				Middle					Other names by which you have been known			
Address																	
		Number Street						City					State			Zip	
Cell Phone	()						-		Home F	Phone	()					
Email																	
Are you lega	ılly eligib	le to wor	k in th	ne U.S.?													
							Р	OSITIO	N DE	SIRE)						
What kind of p	osition a	re you app	olying f	for? (check	c one)											
What are two important factors when choosing a job/company? 1)																	
	·																
What is your v	vage exp	ectation?		\$		(per Yea	or Ho										
	WORK SCHEDULE																
What is the fe	west nur	nber of ho	urs vo	u would co	nside	er accepta	able?			Per	Week		Per	Dav			
Can you work			-					ara diffaran					_				
What schedul							aulea	are unierer	it every	week)							
What schedul	e are you	SUNDA		MONDA		TUESE) AV	WEDNE	SD AV	THUR	SDAV	FRIDAY	SATURDA	V			
	AM	JUNDA	AI	MONDA	VI	TOLSE	AI	VYLDINL	JUAI	HIOK	JUAI	I KIDAI	SATURDA	A.I			
	AIVI	From	То	From	То	From	То	From	То	From	То	From To	From	То			
	PM	From	То	From	То	From	То	From	То	From	То	From To	From	То			
							ОТ	HER IN	FOR	MATIC	N						
												•					
In your prior employment, have you had shortages or misunderstandings about merchandise or funds? If yes, please describe fully:																	
Have you ever been terminated from a job or asked to resign?																	
If yes, please describe fully including dates:																	
Do you have reliable transportation?																	
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?																	
Have you ever worked for DCC?																	
If yes, when ?																	
Do you have relatives working for DCC?																	
If yes, name																	

EMPLOYMENT HISTORY Begin with your current or most recent position and include military service, full time jobs, part time jobs or self employment. Even if you have a resume, please complete the work history in detail. May we contact your present employer? Phone () Position Company Duties Address Supervisor Title Dates Employed Supervisor Reason for Leaving Wage (starting / ending) Phone ()_____ Position Company Duties Address **Dates Employed** Supervisor _____ Supervisor Title _____ Wage (starting / ending) Reason for Leaving Phone () Company Duties ____ Address Supervisor Title _____ **Dates Employed** Supervisor _____ Reason for Leaving Wage (starting / ending) **EDUCATION** High School (or GED) GPA Major course of study: Graduated College **GPA** Graduated Major course of study: Graduate School GPA Graduated Major course of study: Have you taken any other specialized courses / seminars? If yes, please describe: **CHARACTER REFERENCES** (provide 3 references who are not relatives or former employers) Years Known Full Name Occupation Phone Full Name Occupation Phone Years Known Full Name Occupation Phone Years Known **EMERGENCY INFORMATION** (in case of emergency, please notify the following) Name __ Phone () Relationship First Middle Address Street Number City Zip code **ACKNOWLEDGMENT** I authorize DCC to verify my past employment and education, criminal records, motor vehicle records, personal references, and other job related data provided on this application or via the interview process. I also understand and agree that my employment may be conditional on me passing a drug and/or alcohol test. I authorize the appropriate individuals, companies, institutions, or agencies to release information and I release them from any liability as a result of such inquiries or disclosures of truthful information made in good faith. I understand that false or misleading statements on this application or concealment of requested facts may be considered cause for disqualification or termination. I understand that nothing in this employment application, in DCC statements or personnel guidelines or in my communications with any DCC official is intended to create an employment contract between DCC and me. I also understand that DCC has the right to modify its policies without giving me any notice of the change(s). I understand that if an employment relationship is established, I have the right to terminate my employment at any time. I also understand that DCC retains the right to terminate my employment at any time. Printed Name ____ Signature _____