Please email your application to <u>queenia@queenia.net</u> after completion.

## **Queenia Fashion**

## **Application for Employment**

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Date received:

Reviewed by:

All information must be completed to be considered For employment. Attach a resume if available.

												Date:	
Name: _													
		ast							First			Middle	
Present A	Addres			Stree							City	State	Zip
How long at current address:													
Telephor	ne: (	)			_ (dc	ıy tim	ie)	(	)		(evening)		
Are you over 18 years of age? Yes No If NO, can you provide proof of your eligibility to work? Yes No													
Can you, after employment, submit verification of your legal right to work in the United States?  Yes No. (Proof of eligibility will be required if hired.)													
Employment desired:   Full-time only   Part-time only   Full- or Part-time													
What da	ys are All	you c	availc T	sble?	Th	F	Sa	Su			How many	hours are you	looking to wor
Day											per week?		
Eve											(We consid	der 30+ hours/w	reek full time)
Position applied for: (then circle) QUEENIA South Shore Plaza / Cambridge / Chestnut Hill / Copley Place / Burlington Mall													
When are you available to start work? Email:													
Do you have a valid driver's license? Yes No													
Have you ever applied with our organization before? Yes No If yes, state for what position and approximate date you applied.													

Type of School	Name of School	Location (address)	# of Years Completed	Major and Degree
High School				
College				
Bus. or Trade School				
Professional School				

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Please list your work experience beginr acceptable response.	ning with your most recent jo	ob held. "See resume" i	s not an
Name And Address Of Previous Employer	Period Of Employment (Month - Year)	Complete The Following	Reason Fo Leaving
Company	From	Kind Of Business	
Address	То	Position	
City	Supv's Name/Phone #		Pay or Salary
Duties:			
Duties:  May we contact for reference: Yes No	o. If no, state reason why:		
	p. If no, state reason why: Period Of Employment (Month - Year)	Complete The Following	Reason For Leaving
May we contact for reference: Yes No Name And Address Of Previous	Period Of Employment	Complete The	Reason Fo
May we contact for reference: Yes No Name And Address Of Previous Employer	Period Of Employment (Month - Year)	Complete The Following	Reason Fo
May we contact for reference: Yes No Name And Address Of Previous Employer Company	Period Of Employment (Month - Year) From	Complete The Following Kind Of Business	Reason Fo

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Name And Address Of Previous Employer	Period Of Employment (Month - Year)	Complete The Following	Reason For Leaving
Company	From	Kind Of Business	
Address	То	Position	
City	Supv's Name/Phone #		Pay or Salary
Duties:			
May we contact for reference: Yes No.	If no, state reason why:		
Additional Experience Or Qualifications: List of volunteer experience, which you believe quot applying for and should be considered in evolutions.	alify you to perform job-relate	ed functions in the position	
Why do you want to work for QUEENIA?			
This do you want to work for Golding.			
Please list two additional references other tha	an relatives		
Name:	Name:		
Title:	Title:		
Company:	Company:		
Address:	Address:		
Phone:	Phone:		

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## **Applicants Certification and Agreement**

As an indication that you have read and understood these statements, please write your initials in the spaces provided below, and sign and date application.

I understand that neither the completion of this application consideration for employment establishes any obligation fo	· · · · · · · · · · · · · · · · · · ·
If I am hired, I understand that QUEENIA is an "at will" employed that both QUEENIA and I have the right to terminate employed reason, with or without cause and without prior notice. I un QUEENIA has the authority to make any assurance to the contract of	yment at any time and for any derstand that no representative of
I attest with my signature below that I have given to QUEEN on this application. No requested information has been co misrepresentations in this application or any attachment, or grounds for denial of employment or immediate dismissal if QUEENIA until after my becoming employed.	ncealed. I understand that any any omission of material facts is
I hereby give QUEENIA permission to contact schools, all pre- indicated), references, and others, and hereby release QUE such contact. Further, I release the above mentioned refe any damages that may result from information collected by	EENIA from any liability as a result o rences from any and all liability for
Applicant Signature	Date

## **Equal Opportunity Employer**

QUEENIA is committed to a policy of equal employment opportunity, and does not discriminate in the terms and conditions of employment because of race, age, sex/gender, religion, color, national origin, creed, sexual orientation, veteran status, pregnancy, citizenship status, physical or mental disability, genetic information and any other factor protected by law.

This application is valid only for 60 days from the date signed/dated above. If you have not been offered employment within 60 days of your application, it will be necessary for you to submit another application.