

SAN DIEGO
Fashion Valley, 2nd Floor
(619) 294-8878

RANCHO BERNARDO
4S Commons Town Center
(858) 674-9990

CARLSBAD
The Forum, 1935 Calle Barcelona
(760) 632-1107

WESTFIELD UTC
4545 La Jolla Village Dr., La Jolla
(858) 546-7633

LA JOLLA
7850 Girard Ave.
(858) 456-4441

CARMEL VALLEY
3435 Del Mar Heights Rd.
(858) 350-9038

OLD TOWN
2754 Calhoun, San Diego
(619) 293-7520

DEL MAR
Flower Hill, 2670 Via de la Valle
(858) 755-2100

HEADQUARTERS AT SEAPORT
789 West Harbor Dr., San Diego
(619) 615-0005



APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION:

DATE: _____

NAME: _____
LAST FIRST MIDDLE

PRESENT ADDRESS: _____
STREET CITY STATE ZIP

PERMANENT ADDRESS: _____
STREET CITY STATE ZIP

PHONE NUMBER(S): _____

NAME AND RELATIONSHIP OF ANY RELATIVES IN OUR EMPLOY: _____ REFERRED BY: _____

EMPLOYMENT DESIRED:

POSITION: _____ STARTING DATE: _____ SALARY DESIRED: _____

ARE YOU CURRENTLY EMPLOYED? _____ MAY WE CONTACT YOUR EMPLOYER? _____

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? _____ WHERE? _____ WHEN? _____

AVAILABILITY: MON. _____ TUE. _____ WED. _____ THU. _____ FRI. _____ SAT. _____ SUN. _____

EDUCATION:

SCHOOL	NAME AND LOCATION	GRADUATED		MAJOR SUBJECTS	GPA
		YES	NO		
HIGH SCHOOL	_____				

COLLEGE	_____				

OTHER	_____				

SUBJECTS OF SPECIAL STUDY OR TRAINING: _____

SPECIFIC EXPERIENCE WITH CHILDREN AND/OR RETAIL: _____

ACTIVITIES AND SPECIAL INTERESTS: (CIVIC, ATHLETIC, ETC.) _____

(EXCLUDE ORGANIZATIONS, THE NAME OR CHARACTER OF WHICH INDICATES THE RACE, CREED, SEX, MARITAL STATUS, AGE, COLOR, OR NATIONAL ORIGIN OF ITS MEMBERS.)

(CONTINUED ON OTHER SIDE)

FORMER EMPLOYERS: LIST YOUR LAST THREE EMPLOYERS, STARTING WITH PRESENT OR MOST RECENT.

DATE (MONTH AND YEAR)	NAME AND ADDRESS OF EMPLOYER	POSITION	REASON FOR LEAVING
FROM:	NAME:		
	ADDRESS:		
TO:	CONTACT: PHONE:		
FROM:	NAME:		
	ADDRESS:		
TO:	CONTACT: PHONE:		
FROM:	NAME:		
	ADDRESS:		
TO:	CONTACT: PHONE:		

REFERENCES: LIST THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS AND PHONE NUMBER	YEARS AQUAINTED

IN CASE OF EMERGENCY, NOTIFY: _____
NAME

_____ ADDRESS _____ PHONE NUMBER(S)

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

SIGNED: _____ DATE: _____

APPLICANT - DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY: _____ DATE: _____

INTERVIEWED BY: _____ DATE: _____

HIRED: _____ STORE: _____ POSITION: _____ START DATE: _____ SALARY: _____

APPROVALS:

1. _____ 2. _____ 3. _____
STORE MANAGER AREA MANAGER OWNER