



EMPLOYMENT APPLICATION S & G ENTERTAINMENT, INC.

STORE NO. _____

Instructions: Fill out neatly & completely. All sections must be complete. Please print except where signature is required. No action can be taken on this application until all questions have been completed.

Name _____
LAST FIRST MIDDLE

Other names used _____ Email address _____

Address (Present) _____
Number and Street City State Zip Phone Number

Address (Permanent) _____
Number and Street City State Zip US Citizen? yes no

Are you over the age of 18? yes no Valid drivers license? yes no License No. _____ State _____

Position Applied for _____ Date Available _____ Are you available for? Full-time Part-time

Kindly "X" times you can work

| | Mon | Tues | Wed | Thur | Fri | Sat | Sun |
|-----------|-----|------|-----|------|-----|-----|-----|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

Any Time

Referred by: Newspaper Internet An Employee Other

Have you been convicted of a felony or misdemeanor or released from prison in the past 10 years? yes no

If yes, Please Explain (this information may not prevent you from being hired). _____

Will Visa or Immigration prevent lawful employment? yes no

Have you ever received or been denied workers compensation? yes no

If yes, how many times? _____ At which companies? _____

Circumstances: _____

| Education | Name and Location | Circle Last Year Completed | Dates | | Major Course | Graduate/Degree |
|------------------------|-------------------|----------------------------|-------|----|--------------|-----------------|
| | | | From | To | | |
| High School | | 9 10 11 12 | | | | |
| College | | 1 2 3 4 | | | | |
| Technical Trade School | | 1 2 3 4 | | | | |

Other education or training _____

Military Service? yes no Active Duty From _____ To _____ Rank Attained _____

Are you a member of the reserve? yes no Branch of service _____

Are you now or do you expect to be engaged in any other business or employment? yes no

If yes, Please explain _____

References

| NAME | PHONE | YEARS KNOWN |
|------|-------|-------------|
| | | |
| | | |
| | | |

Employment History. Beginning with most recent employer list all employment for the past 10 years including any period of self-employment and/or unemployment longer than one month. Use a second sheet of necessary.

| | | | | | |
|-------------------------------------|--|-------------------------|-----------------------------|-----------------------|-------------------------|
| Company Name | | Type of Business | | Business Phone | |
| <i>Street</i> | | <i>City</i> | | <i>State</i> | |
| <i>Zip Code</i> | | | | | |
| Address | | | | | |
| Position Held | | Hours per week | Wages | | Employment Dates |
| | | | <i>Starting</i> <i>Last</i> | | <i>From:</i> <i>To:</i> |
| Name and Title of Supervisor | | | Reason for Leaving | | |
| Duties: | | | | | |

| | | | | | |
|-------------------------------------|--|-------------------------|-----------------------------|-----------------------|-------------------------|
| Company Name | | Type of Business | | Business Phone | |
| <i>Street</i> | | <i>City</i> | | <i>State</i> | |
| <i>Zip Code</i> | | | | | |
| Address | | | | | |
| Position Held | | Hours per week | Wages | | Employment Dates |
| | | | <i>Starting</i> <i>Last</i> | | <i>From:</i> <i>To:</i> |
| Name and Title of Supervisor | | | Reason for Leaving | | |
| Duties: | | | | | |

| | | | | | |
|-------------------------------------|--|-------------------------|-----------------------------|-----------------------|-------------------------|
| Company Name | | Type of Business | | Business Phone | |
| <i>Street</i> | | <i>City</i> | | <i>State</i> | |
| <i>Zip Code</i> | | | | | |
| Address | | | | | |
| Position Held | | Hours per week | Wages | | Employment Dates |
| | | | <i>Starting</i> <i>Last</i> | | <i>From:</i> <i>To:</i> |
| Name and Title of Supervisor | | | Reason for Leaving | | |
| Duties: | | | | | |

What do you know about our company? _____

What do you want in a job? What is important to you about working? _____

What are your career objectives? What would you like to be doing in two years (type of work, position, etc.)? _____

Describe the management style you were least comfortable with. _____

Circle two words in each box which most relate to you, the words that have the greatest value to you. Don't spend more than 10 seconds per box.

Complete the selections from all 36 boxes. When you are done, line up the letters at the left of the page with each row of words. Count the number of times you have selected each letter (A, B, C, or D) and log these totals in the area provided.

| | | | | |
|---|---------------|-----------------|------------------|-----------------------|
| A | Action | Reality | Smart | Quick |
| B | Vision | Belief | Bright | Alert |
| C | Strategy | Value | Ingenious | Perceptive |
| D | Planning | Proof | Accurate | Reliable |
| B | Relationships | Excitement | Invest | Opportunity |
| C | Solutions | Evaluation | Piece Together | Possibility |
| D | Statistics | Fortification | Garner/Save | Stability |
| A | Results | Urgency | Buy | Focus |
| C | Synergy | Balance | Patience | Illustrate |
| D | Uniformity | Integrity | Order | Expect |
| A | Autonomy | Independence | Drive | Command |
| B | Team Work | Agreement | Enthusiasm | Teach |
| D | Organization | Information | Resolve | Advise |
| A | Concrete | Power | Effort | Candor |
| B | Abstract | Motivation | Energy | Diplomacy |
| C | Design | Systems | Tenacity | Process |
| A | Authority | Initiate | Activate | Decisions |
| D | History | Document | Consolidate | Report |
| B | Unity | Present | Stimulate | Openness |
| C | Continuity | Configure | Rearrange | Appropriateness |
| B | Diversity | Charisma | Clever | Change |
| D | Detail | Conservation | Formal | Maintain |
| C | Complexity | Problem-solving | Eclectic | Consider alternatives |
| A | Simplicity | Substance | Practical | Implement |
| C | Pathways | Direction | Brainstorming | Puzzles |
| A | Bottom Line | Work | Conflict | Conclusions |
| B | Dialogue | Promotion | Discussion | Variety |
| D | Analysis | Observation | Devil's Advocate | Comparison |
| D | Justice | Assimilation | Instruct | Inform |
| B | Worth | Resiliency | Pull | Inspire |
| C | Wisdom | Adroitness | Guide | Suggest |
| A | Sufficiency | Efficiency | Push | Direct |
| A | Effective | Strength | Emotion | Righteousness |
| D | Steady | Precision | Knowledge | Law & Order |
| C | Logical | Variety | Intellect | Compassion |
| B | Courageous | Harmony | Heart | Love |

SKILLS AND QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with our company.

Read carefully before signing

Applicant Certification and Agreement

I understand that I am subject to drug and/or alcohol screening before and/or during employment.

I hereby certify that all information in this application form is true and correct and that any misrepresentation or omission of facts is cause for dismissal.

I give the employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and it's representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

The application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer, and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause, and without prior notice. I understand that no representative of the Employer has the authority to make any assurance to the contrary.

Signature of Applicant _____ **Date** _____

TO BE COMPLETED BY COMPANY REPRESENTATIVE

BACKGROUND SCREENING

Criminal _____

Civil _____

Credit _____

DMV _____

Other _____