

Boone Ace Hardware 1735 SE Marshall St Boone, IA 50036 Ph 515-432-3543

booneace@harlandinc.com

Boone Ace Hardware is an equal opportunity employer. Applicants are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

Date Position Applied For			
Referral Source:AdvertisementWalk-InRelativeAce Employee	Sign in Store	Web Site	e
Name: First Middle	Last		
Address:			
Address:(Number) (Street)	(City)	(State)	(Zip)
Cell Phone Landl			
Are you at least 16 years of age?YesNo 21 years of age?YesNo	; 18 years of age	?Yes _	No;
Are you able to perform the essential functions of without reasonable accommodations?	•	ou applied, w	ith or
Have you filed an employment application here be	efore?Yes	_No Give da	ıte
Have you been employed here before?Yes	No	Give date	
Do you have any relatives currently working for a	n Ace Hardware sto	re?Yes	No
If so, give name and location			
Are you employed now?YesNo May we co	ontact your present e	mployer?	YesNo
Availability for work:Full TimePart-Tin	ne		
On what date would you be available to work?			
Can you travel if the job requires it?Yes	_No		
Have you ever been convicted of a crime other th	an a routine traffic	/iolation?	YesNo
If yes, complete the following:Felony			
Dates and circumstances			

Education

	High School	College/University	Graduate/ Professional	Continuing Education
School Name				
City, St. Located				
Years Completed (circle)	9 10 11 12	1 2 3 4 5	1 2 3 4	1 2 3
Diploma/Degree				
Earned GPA				
Course of Study				
Describe honors received, extracurricular activities, etc.				

List equipment, machinery	QUALIFICATIONS, and EXPERIENCES y, special skills and qualifications acquired from past employment
List applicable profession	al, technical licenses, or certifications received.
List professional, business	s or civic activities, accomplishments, and offices held.
REFERENCES	
Give name, address, and	telephone of two references who are not related to you.
Name:	Name:
Address:	Address:
City, St, Zip	City, St, Zip
Phone	Phone

EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include military assignments.

1.				
Past Employer	Telephone		Date Began	Date Ended
Address	Supervisor		Wage/Salary Start	Wage/Salary End
City, St				
Work Performed		Reason for	Leaving	
2. Past Employer	Telephone		Date Began	Date Ended
Address	Supervisor		Wage/Salary Start	Wage/Salary End
City, St				
Work Performed		Reason for	Leaving	
3.				
Past Employer	Telephone		Date Began	Date Ended
Address	Supervisor		Wage/Salary Start	Wage/Salary End
City, St				
Work Performed		Reason for	Leaving	
4.				
Past Employer	Telephone		Date Began	Date Ended
Address	Supervisor		Wage/Salary Start	Wage/Salary End
City, St				
Work Performed	•	Reason for	Leaving	·

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigations of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed three months. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time and should renew their application in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

In the event of employment, I understand that I must complete the Employment Eligibility Verification Form I-9.

I understand that if hired by Boone Ace Hardware, my employment is at will and may be severed by either party at any time with or without cause. I understand that neither this document nor an offer of employment from Boone Ace Hardware constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

Applicant's Signature	Date