



PAVILION GIFT COMPANY
Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status

(Please Print)

Position(s) Applied for:			Date of Application:		
How did you learn about us?					
Last name:		First Name:		Middle Name:	
Address:	Number:	Street:	City:	State:	Zip Code:
Telephone Number(s):			Email:		
Best time to call you at home is: _____:_____ am/pm					
If you are under 18 years of age, can you provide required proof of your eligibility to work? _____ Yes _____ No					
Have you ever filed an application with PGC before? _____ Yes _____ No If Yes, give date _____					
Have you ever been employed with us before? _____ Yes _____ No If Yes, give date _____					
Do any of your friends or relatives work here? _____ Yes _____ No If Yes, state name, relationship & location: _____					
Are you currently employed? _____ Yes _____ No					
May we contact your present employer? _____ Yes _____ No					
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? _____ Yes _____ No <i>Proof of citizenship or immigration status will be required upon employment</i>					

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Date available for work ____/____/____ What is your desired salary range? _____

Are you available to work: _____ Full Time _____ Part Time _____ Temporary

If you are available Part Time or Temporary please indicate availability: _____

Are you on "lay-off" status and subject to recall? _____ Yes _____ No

Can you travel if your job requires it? _____ Yes _____ No

EDUCATION:

SCHOOL	Name & Address of School:	Course of Study:	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (specify)				

WORK EXPERIENCE:

Start with your present or last job. Include any job-related, military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status

Employer:	Dates Employed		Work Performed:
	From:	To:	
Address:			
Telephone Number(s):			Reason for leaving:
Starting/Present Job Title:			
Supervisor:			May we contact? _____ Yes _____ No

WORK EXPERIENCE:

Employer:	Dates Employed		Work Performed:
	From:	To:	
Address:			
Telephone Number(s):			
Starting/Present Job Title:			
Supervisor:			May we contact? _____ Yes _____ No

Employer:	Dates Employed		Work Performed:
	From:	To:	
Address:			
Telephone Number(s):			
Starting/Present Job Title:			
Supervisor:			May we contact? _____ Yes _____ No

Comments: Include explanation of any gaps in employment:

Describe any specialized training, apprenticeships, skills and extra-curricular activities:

Describe any job-related training received in the United States military:

Additional information:

Other qualifications: *Summarize special job-related skills and qualifications acquired from employment or other experiences:*

Specialized Skills:

_____ Scanning (*pictures and documents*) _____ Powerpoint _____ Excel
_____ Word Processing - _____ Words per Minute _____ MS Word
_____ Other _____

State any additional information you feel may be helpful to us in considering your application:

List three professional references who are familiar with the quality of your work, have worked directly with you, and have known you for at least two years.

Name: _____

Address: _____

Phone Number: _____ Best Time to call: _____

Occupation: _____ Relationship to you: _____

Name: _____

Address: _____

Phone Number: _____ Best Time to call: _____

Occupation: _____ Relationship to you: _____

Name: _____

Address: _____

Phone Number: _____ Best Time to call: _____

Occupation: _____ Relationship to you: _____

APPLICANT'S STATEMENT:

I certify that the answers given herein are true and complete.

I authorize investigation 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 for a period of time not to exceed 180 days. Any applicant wishing to be considered for employment beyond the time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by an applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by and authorized executive of this organization.

In the event of employment, I understand 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.

(signature of applicant)

(date)

Return Completed Form To:



Pavilion Gift
8210 Buffalo Road, Bergen, NY 14416
Bergen, NY 14416