

AÉROPOSTALE

EMPLOYMENT APPLICATION

Please Print Clearly And Complete Both Sides Of This Employment Application.
Applications Will Remain Active For One Month.

During seasonal periods, all sales and stock associates hired between 7/1 - 9/15 and 10/15 - 12/31 will be hired as Temporary employees and subject to layoff at the end of the seasonal period. Consideration to be hired as part of the store's core staffing will be given to associates based on performance, availability, and the needs of the business.

TODAY'S DATE		AÉROPOSTALE IS AN EQUAL OPPORTUNITY EMPLOYER			
NAME (LAST)		(FIRST)		(MIDDLE)	
					HAVE YOU EVER WORKED OR ATTENDED SCHOOL UNDER ANOTHER NAME THAT WE NEED TO KNOW TO VERIFY YOUR RECORDS? IF YES, NAME: <input type="checkbox"/> YES <input type="checkbox"/> NO
PERMANENT ADDRESS (NUMBER, STREET, CITY, STATE & ZIP)					HOME PHONE NUMBER
<input type="checkbox"/> TEMPORARY <input type="checkbox"/> MAILING ADDRESS			SOCIAL SECURITY NUMBER		BUSINESS OR TEMPORARY PHONE
POSITION DESIRED		SCHEDULE PREFERRED		WHAT DAYS OR TIMES ARE YOU NOT AVAILABLE FOR WORK?	
		<input type="checkbox"/> FULL TIME (7, 7 1/2 or More hours Daily - 5 days) <input type="checkbox"/> PART TIME (Days / Evenings / Weekends)			
LIST NAMES OF FRIENDS AND RELATIVES NOW EMPLOYED BY AÉROPOSTALE.		ARE YOU 18 YEARS OF AGE OR OVER? YES <input type="checkbox"/> NO <input type="checkbox"/>		CURRENTLY EMPLOYED? <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> NOT EMPLOYED	
LIST YOUR INTERESTS, HOBBIES, OR SPECIAL SKILLS			FOREIGN LANGUAGE(S) SPOKEN FLUENTLY WHICH WOULD BE HELPFUL IN POSITION SOUGHT.		
LIST NAMES OF ALL ORGANIZATIONS OF WHICH YOU ARE A MEMBER (EXCLUDE ANY ORGANIZATION WHICH WOULD INDICATE THE FOLLOWING: RACE, COLOR, CREED, ANCESTRY, NATIONAL ORIGIN, RELIGION, SEX, OR MARITAL STATUS)					
HAVE YOU EVER BEEN EMPLOYED BY AÉROPOSTALE? YES <input type="checkbox"/> NO <input type="checkbox"/>		IF YES, UNDER WHAT NAME WERE YOU EMPLOYED?		STORE LOCATION? DATES EMPLOYED? FROM: TO:	

PREVIOUS EMPLOYMENT

LIST IN ORDER OF EMPLOYMENT STARTING WITH YOUR PRESENT EMPLOYMENT. PLEASE ACCOUNT FOR ALL TIME, INCLUDING CURRENT EMPLOYMENT, MILITARY SERVICE, PART TIME JOBS, AND PERIODS OF UNEMPLOYMENT. IF YOU HELD TWO JOBS AT THE SAME TIME, BE SURE TO LIST BOTH JOBS. STATE IF ANY OF THESE EMPLOYERS ARE RELATED TO YOU. USE ADDITIONAL SHEET IF NECESSARY.

NAME OF BUSINESS	ADDRESS OF BUSINESS	NAME OF SUPERVISOR	SALARY		JOB TITLE OR NATURE OF WORK	REASON FOR LEAVING	DATE FROM		DATE TO	
			START	END			MO	YR	MO	YR

EDUCATION

SCHOOL	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	DATE FROM		DATE TO		CIRCLE LAST YEAR COMPLETED	LIST DIPLOMA/ DEGREE
			MO	YR	MO	YR		
HIGH SCHOOL							1 2 3 4	
COLLEGE							1 2 3 4	
OTHER (SPECIFY)							1 2 3 4	

ADDITIONAL EMPLOYMENT HISTORY INQUIRIES

HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM ANY EMPLOYMENT?

IF YES, PLEASE EXPLAIN

YES NO IF YES, PLEASE EXPLAIN: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY CRIME OR THEFT-RELATED MISDEMEANOR WITHIN THE LAST 5 YEARS?

YES NO IF YES, STATE DETAILS: _____

CONVICTIONS WILL NOT NECESSARILY DISQUALIFY AN APPLICANT; EACH CASE IS CONSIDERED INDIVIDUALLY.

PERMISSION TO WORK

IF EMPLOYMENT IS OFFERED, CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U.S.?

YES NO

REFERRAL SOURCE

WALK-IN APPLICANT NEWSPAPER AD EMPLOYEE REFERRAL (NAME) _____ OTHER (PLEASE LIST) _____

COMMUNITY ORGANIZATION SCHOOL/COLLEGE (NAME) _____

REFERENCES

REFERENCE (NOT RELATED TO YOU)

ADDRESS STREET CITY STATE ZIP

PHONE JOB TITLE

HOW ACQUAINTED AND FOR HOW LONG?

REFERENCE (NOT RELATED TO YOU)

ADDRESS STREET CITY STATE ZIP

PHONE JOB TITLE

HOW ACQUAINTED AND FOR HOW LONG?

A GOOD ATTENDANCE RECORD IS AN IMPORTANT PART OF EVERY ASSOCIATE'S OVERALL PERFORMANCE. DO YOU KNOW OF ANY REASON YOU MAY NOT BE ABLE TO COMPLY WITH AÉROPOSTALE'S ATTENDANCE POLICY? IF SO, PLEASE EXPLAIN.

IMPORTANT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that the answers I have given in this application are true and accurate to the best of my knowledge and I understand that any false or misleading answers or any omission or concealment of facts will disqualify me from consideration for employment or will be grounds for my immediate discharge.

In making this application for employment, I understand that an investigative consumer report may be prepared which may include information as to my character, general reputation, personal characteristics and mode of living, obtained through personal interviews with neighbors, friends and associates. In addition, information may be obtained from former employers and educational institutions which I have attended. A credit bureau report may also be obtained as part of this application and later for purposes of promotion, reassignment or retention. I hereby authorize my former employers, educational institutions, credit bureaus, references, neighbors and friends to disclose to you any and all information concerning my previous employment and any other pertinent information they may have, personal or otherwise, and I release all parties from any liability whatsoever resulting from such disclosure. I understand that should such investigation reveal any false statements made by me or other derogatory information, I may be disqualified from employment or subsequently dismissed. I understand that I have the right to make a written request within a reasonable period of time from the date of this application for a complete and accurate disclosure of the nature and scope of the investigative report requested. I further understand that, if I am hired, subsequent consumer reports may be requested without additional notice to me, in connection with the continuation of my employment. Information received by us from another company or person concerning your experiences with that company or person may be shared at any time by us with our affiliates. In addition, we may share with our affiliates other types of information. Including information obtained from consumer reporting agencies, and, if you do not want us to share this information, you need to send or give us a written direction not to communicate this information at:

Aéropostale
112 W. 34th Street
New York, NY 10120

I agree to conform, to the rules and regulations of the Company, and if employed, I understand and agree that my employment is at-will and no employment contract rights have been created, I also understand and agree that my employment may be terminated at any time with or without cause, and without advance notice at the option of either the Company or myself. I also understand that no supervisor, manager or other representative of the Company has any authority to enter into any express or implied contract for employment for any specific period of time. Any agreement contrary to the above, must be in writing and must expressly state that it is a contract to be signed by the Senior Vice President for Human Resources of Aéropostale.

I understand that any offer or employment is conditioned upon the satisfactory completion of the verification process as required by the Immigration Reform and Control Act of 1986, and that the Company will hire only those individuals who are legally authorized to work in the United States and who present acceptable proof of their lawful employment status and identity.

By placing my signature below, I certify and acknowledge that I have read the above and understand it.

I CERTIFY THAT I HAVE READ THE ABOVE, UNDERSTAND IT AND AGREE TO IT

SIGNATURE OF APPLICANT (DO NOT PRINT)

APPLICANTS IN THE STATE OF MARYLAND ONLY

Under Maryland law an employer may not require or demand any applicant for employment or prospective employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment or continued employment. Any employer who violates this provision is guilty of a misdemeanor and subject to a fine not to exceed \$100.

Signature

Date

APPLICANTS IN THE STATE OF MASSACHUSETTS ONLY

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Signature

Date

AÉROPOSTALE

Authorization & Release Employment Screening Form

By signing this form you are:

Authorizing (giving permission) for Aéropostale to receive one or more consumer reports, from a consumer reporting agency (CRA), regarding you, with information on any of the following: your pending prosecution, convictions, incidents of theft, motor vehicle reports, private companies drug offense or violence reports, or credit bureau reports.

By signing this form you are:

- **Releasing (agreeing not to take action against)** Aéropostale or the screening companies (CRA), or the companies that provide information to those screening companies, used from all claims you may have against them for providing information about you.
- While employed by Aéropostale should you take cash, merchandise or property, we may report this incident to our screening company and it may affect your ability to be employed by other retailers.
- By no means does this form create a contract of employment with Aéropostale. Should you be hired, you have the right to end your employment with Aéropostale, and Aéropostale reserves that same right.
- During any period if you are employed by said Employer, you are authorizing Employer to make further inquiries, if they feel necessary, to any CRA (Consumer Reporting Agency).
- I understand that I can request a copy of my report from the screening company and I may dispute the accuracy and completeness of any such report. These reports are to be used for employment purposes only.

Print Name:	_____	Social Security #:	_____
Street Address:	_____	Store Location:	_____
City, St., Zip:	_____	Drivers License State:	_____
Phone #:	_____	Drivers License #:	_____
Previous Address:	_____	Drivers Exp. Date:	_____
Street Address:	_____	Signature:	_____
City, St., Zip:	_____	Date:	_____
Phone #:	_____		

Interviewers Name: _____	Interviewers Signature: _____
Phone #: _____	Date: _____

Screening Services Requested: Call 800-570-4831

	Accepted:	Pending:
Retail Search: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Credit Check Search: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criminal Search: <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>