The **GYMBOREC**Corporation An Equal Opportunity Employer

Employment Application

Location/Store/Shop #:	1	「oday's Date:		Position desired:									
LACT NAME	ГІРСТ	MIDE	N. F. INITIAL	Minimum salary desired:									
LAST NAME	FIRST	MIDL	DLE INITIAL	Date available for work:									
STREET ADDRESS				_	_								
CITY	STATE	ZIP		☐ FULL TI	ME L	PART TIM	Ł ∐∥	EMPORAR	1				
()	(Are you at least 18 years old?					ES NO				
				Please ind		nours you	are availa	ble to wor	k during b	oth day a	nd evening		
EMAIL				shifts for ea	ach day:								
If you have worked for our c				SHIFT	SUN	MON	TUES	WED	THURS	FRI	SAT		
reason for leaving*:				DAY									
				EVENING									
				NOTE: Should	d your availab	ility change, i	t is your respo	nsibi l ity to no	tify your super	visor.			
Have you ever applied to our	company before? If yes,	when?*:		In order to	permit a d	heck of yo	ur work an	d educati	on, have y	ou ever us	sed anothe		
				name, nick						identify n	ame(s)		
Do you have any relatives th store are they working in?* _				and relevar	it date(s):								
Store are they working in: _													
*NOTE: Please see note on reverse side	e of this application												
WORK EXPERIENCE	List your previous expe	rience beginning	with your most	recent position	ı. (Please	include al	II fields.)						
EMPLOYER				STARTING POSITION			STARTING SALARY						
STREET ADDRESS	CITY	STATE	ZIP	LAST POSITION			LAST	LAST SALARY					
PHONE	SUPERVISOR	TITLE		DUTIES									
REASON FOR LEAVING				DATES OF E	MPLOYMENT			STAR	Γ	END			
EMPLOYER				STARTING POSITION		STAR	STARTING SALARY						
STREET ADDRESS	CITY	STATE	ZIP	LAST POSIT	LAST POSITION			LAST	LAST SALARY				
PHONE	SUPERVISOR	TITLE		DUTIES									
REASON FOR LEAVING				DATES OF E	MPLOYMENT			STAR	Т	END			
EMPLOYER				STARTING P	OSITION			STAR	TING SALARY				
STREET ADDRESS	CITY	STATE	ZIP	LAST POSIT	LAST POSITION LAST SALARY								
PHONE	SUPERVISOR	TITLE		DUTIES									
REASON FOR LEAVING				DATES OF E	MPLOYMENT	-		STAR	Т	END			

OTHER REFERENCES

NAME	ADDRESS		PHONE	Ţ	TITLE		
HOW ACQUAINTED AND FOR HOW LONG							
EDUCATION AND TRAININ	G						
HIGH SCHOOL		CITY	STATE	YEARS COMPLETED	MAJOR		
COLLEGE		CITY	STATE	YEARS COMPLETED	MAJOR		
ADDITIONAL TRAINING		CITY	STATE	YEARS COMPLETED	MAJOR		
		/ employment?*	WHICH THE RECORD HAS BEEN S DISMISSED IN WHICH PROBATION		RS THAT HAVE BEEN JUDICIALLY		
			If yes to any of these questions, plea	ise explain:			
Except for authorized leaves of all were you absent during the past to	twelve months?*		EMERGENCY NOTIF	ICATION DESIGNATION			
☐ 0-6 days ☐ 6-12 days ☐ Comments:	12-20 days	aays	Give the name of person	to contact in case of accident o	r emergency:		
			NAME				
*NOTE: Responding accurately to any of these ques for employment with The Gymboree Corporation. We you are being considered and take into account all le	will assess the information provided a		RELATIONSHIP	PHONE #			
REFERRAL SOURCE			CAREER OBJECTIVE	Ē			
How did you hear of this position?	☐ Walk-in-applicant			working for our company, and v	•		
Community Organization Employment Agency School/College	Name Name						
Other Employee Referral			What are some things you	didn't like about jobs you've had	?		
Newspaper Ad Web Site	Name						

I hereby certify that I have been informed of the duties of the position for which I am applying and that the information in this application is true and complete to the best of my knowledge.

that the information in this application is true and complete to the best of my knowledge.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission, misleading or false information on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that The Gymboree Corporation checks information given on employment applications. I hereby authorize The Gymboree Corporation to thoroughly investigate my references, work record, education, and criminal record, and other matters related to my suitability for employment, and further, authorize the references I have listed to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition. information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release The Gymboree Corporation, my former employers, and all other persons, corporations, partnerships and associations, from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. This authorization does not include release or other prohibited use of disability and medical related information prohibited in pre-employment inquiries by the Americans With Disabilities Act (ADA).

I understand that any offer of employment is conditioned upon the satisfactory completion of the verification process 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. I understand that as a condition of my employment, I may be requested to undergo a pre-employment drug test and/or physical exam.

I further understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and The Gymboree Corporation. I agree and understand that my employment is not a contract of employment for a specified term. Employment with The Gymboree Corporation is not for any specified duration and constitutes at-will employment. Accordingly, I agree that the employment is not a contract of the contract of th relationship may be terminated by either The Gymboree Corporation or me at any time, with or without notice, and with or without cause. I also agree that the at-will relationship constitutes the entire and sole agreement between The Gymboree Corporation and me concerning my employment; this agreement supersedes any and all prior agreements concerning my employment. Finally, I agree that this agreement can only be modified, or amended in writing, as executed by the CEO of The Gymboree Corporation and myself.

DATE SIGNATURE