



**HAVERTYS®**  
**FURNITURE**

# APPLICATION FOR EMPLOYMENT

Haverty Furniture Companies is an equal opportunity employer  
and fully subscribes to the principles of equal employment opportunity.

PLEASE PRINT

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

(Social Security number will be used to verify past employment.)

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Have you been employed under a different name or Social Security number? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, please indicate the name or Social Security number: \_\_\_\_\_

If at present address less than 3 years, previous address: \_\_\_\_\_

Can you submit legal verification of your right to work in the U.S.A? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Are you 18 years of age or older? Yes: \_\_\_\_\_ No: \_\_\_\_\_

(The age discrimination in employment act prohibits discrimination against individuals over 40 years of age)

Position Desired: \_\_\_\_\_

When can you start work? \_\_\_\_\_ Expected Salary: \_\_\_\_\_

A drug screening will be required of all employees prior to starting work. Employment is conditional on successful completion of testing. NOTICE: Haverty Furniture Companies, Inc. does not employ persons involved in drug abuse or alcohol abuse. Certain positions will require a post-offer medical examination before starting work. Employment is conditional on successful completion of the examination.

Institution	Name of School	Location	Years	G.P.A.	Graduate?	Major/Concentration
High School						
College						
College						
Other						

School Activities and Honors: \_\_\_\_\_

(Honorary Academic, Sports, Social)

# WORK HISTORY

Beginning with your most recent or current employer, list below all current and former positions, accounting for any breaks in employment following completion of school. If more space is needed, please attach an additional sheet of paper. If summer or part-time work, please indicate. This section must be completed by all applicants.

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1 Employer: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Date of Leaving: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ Pay at Leaving: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_

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2 Employer: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Date of Leaving: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ Pay at Leaving: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_

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3 Employer: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Date of Leaving: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ Pay at Leaving: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_

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4 Employer: \_\_\_\_\_ Type of Business: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Supervisor/Title: \_\_\_\_\_ Phone: \_\_\_\_\_  
Duties: \_\_\_\_\_  
Starting Date: \_\_\_\_\_ Date of Leaving: \_\_\_\_\_  
Starting Pay: \_\_\_\_\_ Pay at Leaving: \_\_\_\_\_  
Reason For Leaving: \_\_\_\_\_

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If the position requires it,

Do you have a valid drivers license? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have a commercial truck license? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had any traffic violations or accidents? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide details: \_\_\_\_\_

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Any citations for driving while under the influence or driving while intoxicated? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide details: \_\_\_\_\_

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Have you ever been convicted of, entered a plea of guilty, or no contest to a crime? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide details: \_\_\_\_\_

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Have you used a personal computer during previous employment? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe type and software used: \_\_\_\_\_

Do you type? \_\_\_\_\_ wpm: \_\_\_\_\_

Do you have skills on any other office machines and equipment? If so, please list them: \_\_\_\_\_

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Are any of your relatives employed by the Haverty Furniture Companies, Inc.? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the relatives' name and store location: \_\_\_\_\_

Have you ever **applied** for work at a Havertys location? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give the year and location: \_\_\_\_\_

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Have you ever been **employed** at any Havertys location? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please give the location: \_\_\_\_\_

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PLEASE READ THE STATEMENT  
BELOW VERY CAREFULLY,  
THEN SIGN AND DATE THIS STATEMENT.

I understand that the Haverty Furniture Companies, Inc. requires certain information to evaluate my qualifications for employment and to conduct its business if I become an employee. I understand that the company will attempt to verify statements made on my application and made during the employment interview. I authorize the company to contact references and former employers and I authorize my previous employers as indicated, to verify the information given in this application and given during the interview process.

I also understand that this investigation may also include obtaining an investigative consumer report which would include information regarding my character, general reputation, personal characteristics and mode of living. But if employment is denied because of information contained in that report, the company will supply the name and address of the consumer reporting agency responsible for the investigative report. Moreover, I will be given an opportunity to correct any misstatement contained in any such report.

The offer of this application does not indicate there are any positions open and does not in any way obligate this company.

I understand that it is possible that my prior employment records may not be accurate. Nonetheless, in consideration of this company's review of this application, I release this company and any other former employers from any liability as a result of the furnishing and receiving of this reference information.

I understand that this application is not an offer of employment and that, by accepting my application, the company does not guarantee that I will be offered a job. I also under-

stand that, if I am offered and accept a job, the company reserves and retains the right to make such changes in the terms and conditions of my employment as the company determines to be necessary or appropriate.

In consideration of my potential employment, I agree to conform to the rules and regulations of the Haverty Furniture Companies, Inc. and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or amended by the company at any time at the company's sole discretion without prior notice to me. **I understand and agree that employment with Haverty Furniture Companies, Inc. is not for any guaranteed length of time and both the company and I have the freedom to terminate the employment relationship for any reason and for no reason whenever either chooses to do so.** I understand that no one other than the President of the company has the authority to make any other agreement. Any such agreement by the President shall be in writing.

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification, misrepresentation, or intentional omission of this information is grounds for refusal to hire-or if discovered after hired, dismissal.

Employment applications will remain active for no more than sixty days from the date signed, and no application will be considered unless signed and dated.

**The Haverty Furniture Companies, Inc. is an equal opportunity employer and fully subscribes to the principles of equal employment opportunity.**

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APPLICANT'S SIGNATURE

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DATE