

Employment Application

WHY SHOULD YOU JOIN THE OLLIES BARGAIN OUTLET TEAM?



FUN, HIGH ENERGY WORK ENVIRONMENT

- OPPORTUNITY TO CREATE YOUR OWN FUTURE
- CULTURE OF DEVELOPING AND PROMOTING FROM WITHIN
- CREATIVITY ENCOURAGED
- **GREAT COMPENSATION PLANS**
- EMPLOYEE BENEFIT PROGRAM

OLLIE'S BARGAIN OUTLET

6295 Allentown Blvd Suite 1 Harrisburg, PA 17112 717.657.2300 www.olliesbargainoutlet.com

Have you ever ap If yes, where?—— Reason left? ——		Whe	en?		ítíon? ————				
Have you ever been dismissed or forced to resign from any employment? \square Yes \square No If yes, please explain:									
II ges, please explain:									
Please check the shifts you are available to work (hours may vary) and indicate hours available below:									
□Full-Time □ Pa	art-Time								
Availability:									
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday			
	Ü								
Referral Source									
Walk-in Applica	□ Walk-in Applicant □ Newspaper Ad □ Employee Referral (Name)								
Community Or									
School/Colleg	e								
☐ Website (Name	.)			Other					
					YOUR NAME B	ELOW.			

In compliance with Federal and State Equal Employment Opportunity Laws, qualified applicants are considered for all positions applied for without regard to race, color, religion, sex, national origin, age, veteran's status, disability, or any other legally protected status. I certify that answers given herein are true and complete to the best of my knowledge. In the event of my employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. In consideration of my employment, I agree to conform to the rules and regulations of the Company. I acknowledge and understand that (1) no application, policy, rule, regulation, guideline, manual, position guide, newsletter, poster, procedure or similar writing constitutes a guaranty of employment or a con-tract of employment with the Company (2) my employment and compensation can be terminated at any time, for any reason or for no reason, by the Company or me, and (3) no Manager or official of the Company (other than the CEO or President in writing) has the authority to enter into any contract or agreement with me for employment for any specified period of time, or to make any contract or agreement contrary to the foregoing. I understand that unless otherwise prohibited by applicable law, I may be required at any time to submit to a physical, drug or alcohol test, or other examination as a condition of my employment with the Company. By accepting employment, I agree to submit to such examinations or tests as required by the Company, all at Company expense. I authorize you to make such investigations and inquiries of my personal, employment or financial history and other related matters as may be necessary in arriving at an employment, that an individual submit to or take, a lie detector or similar test. An employer who violates this law is guilty of misdemeanor and subject to a fine not exceeding \$100.

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Signature of Applicant	Date	
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WE WANT TO KNOW ABOUT YOU!

Personal Information				
Position Applying for:		ed Pay:		
Today's Date (month/day/year):		/ou Can Start:		
Name:				
Street Address:C				
Previous Address: C		State:	Zíp:	
Telephone Number:				
Are you under 18 years of age? Yes No	Are you under	16 years of age? Yes	No	
Employment Eligibility Are you legally eligible for employment in the United S	States?			
	HISTORY			
Education				
Name of High School:		Graduate?	Yes No	
Address:		1 1 1		
Name of College/Other School:				
Address:		Level Com	 pleted:	
Name of College/Other School:		Graduate?	Yes No	
Address:		Level Com	pleted:	
Background Have you ever been convicted of a felony? (Note: A control to list convictions that have been annulled, expunged, or sealed by the sease explain:		•	nt and you do not have	
Previous Employment				
1.Employer:		Phone Number:		
Position(s):		Ending Pay:		
Date of Employment: From To Supervise Reason for Leaving:)r:	Eligible for Rehire?		
C		<u></u>		
2.Employer:Address:		Phone Number:		
Position(s):		Ending Pay:		
Date of Employment: From To Supervision	or:			
Reason for Leaving:		Eligible for Rehire?		
3. Employer:		_1 1		
Address:Position(s):		Phone Number: Ending Pay:		
Date of Employment: From To Supervise	or:			
Reason for Leaving:		Eligible for Rehire?		
References Please list three references (not relatives).	6 D - W			
1.Name: C Address:	ompany & Position:	Phone Number:		
2.Name: C Address:	ompany & Position: .	Phone Number		
3.Name:C Address:	ompany & Position: -	Phone Number		
		-, HORE NUMBER		
Special Skills List any special skills you have and your level of profi	ciency (i.e. cash har	ndling, computer training, e Please rate ability by circling a nun		
Skill:		Beginner 1 2 3 4 5	Expert	
Skill:		Beginner 1 2 3 4 5	Expert	