

APPLICATION FOR EMPLOYMENT

TO APPLICANT: We appreciate your interest in our organization and we are interested in your qualifications. A clear understanding of your job related skills and experience would aid us in determining whether your qualifications meet our employment needs. We are an Equal Employment Opportunity Employer. Consideration for employment is based solely on individual qualifications, without regard to race, marital status, religious creed, color, national origin, ancestry, physical handicap, medical condition, sex, sexual orientation, age, or any other protected category recognized by applicable federal, state and local law. This employment application is valid for a three-month period after submission to the company and only for the desired position(s).

EMPLOYEE

Name _____ E-Mail Address _____
Last First M. Initial

Present Address _____ Phone Number () _____
Street City Zip

Can you, after employment, submit verification of your legal right to work in the United States? Yes No Are you at least 18 years of age?
 Yes No

Were you previously employed by Sephora or an LVMH Company? Yes No If yes, when?

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes No If yes, state the nature of the crime(s), when and where convicted, and disposition of the case. (Note: Convictions for marijuana-related offenses that are more than 2 years old need not be listed.)

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

List any relatives working for Sephora: _____

POSITION

Position(s) Applied For _____

Expected Rate of Pay \$ _____ per _____ Would you work Full-time (32-40 hours) Part-time (under 32 hours)

Specify days and hours if part-time _____ Days available for work? _____

What source referred you to Sephora? _____

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT.

WORK EXPERIENCE

I	Name of Company	From Month Year	To Month Year	Summarize the Work You Did: Position: _____ Duties:	Reason for Leaving:
	Address				
	Phone Number	Starting Salary	Last Salary		
	Name of Supervisor				
II	Name of Company	From Month Year	To Month Year	Summarize the Work You Did: Position: _____ Duties:	Reason for Leaving:
	Address				
	Phone Number	Starting Salary	Last Salary		
	Name of Supervisor				
III	Name of Company	From Month Year	To Month Year	Summarize the Work You Did: Position: _____ Duties:	Reason for Leaving:
	Address				
	Phone Number	Starting Salary	Last Salary		
	Name of Supervisor				
IV	Name of Company	From Month Year	To Month Year	Summarize the Work You Did: Position: _____ Duties:	Reason for Leaving:
	Address				
	Phone Number	Starting Salary	Last Salary		
	Name of Supervisor				

May we contact the employers listed above? Yes No If no, indicate by # which one(s) you do not wish us to contact _____

