

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).

	Nar	ne				E-Mail Address				
		Last	First	M. Initi	al					
	Pre	sent Address		•	Zip	Phone Number ()			
EMPLOYEE	Car	Street City Can you, after employment, submit verification of your legal right to work in the United					e you at least 18 years of age? Yes No			
	We	re you previously employed by Sep	ohora or an LVMH Compa	any?	No If yes, w	hen?				
EMI	Hav whe	ve you ever been convicted of a crimere convicted, and disposition of the	minal offense (felony or so e case. (Note: Conviction	Yes offenses that a	No If yes, state the na re more than 2 years old ne	ture of the crime(s), when and ed not be listed.)				
	surr	ote: No applicant will be denied em rounding circumstances and the rele t any relatives working for Sephora	evance of the offense to the				nse, the date of the offense, the			
POSITION				E-MANUEL STATE OF THE STATE OF	Almenterative	A STATE OF THE STA				
	Expected Rate of Pay \$		per		Would you work		Part-time (under 32 hours)			
POS		Specify days and hours if part-time				Days available for work?				
		at source referred you to Sephora? ST BELOW ALL PRESE!	NT AND PAST EM	GINNING	WITH YOUR MOST	Γ RECENT.				
	Ī	Name of Company	From Month Year	To Month Year		the Work You Did:	Reason for Leaving:			
		Address			Position:	<u> </u>				
		Phone Number	Starting Salary	Last Salary	Duties:					
WORK EXPERIENCE		Name of Supervisor								
	11	Name of Company	From Month Year	To Month Year	Summarize	the Work You Did:	Reason for Leaving:			
		Address			Position:					
		Phone Number	Starting Salary	Last Salary	Duties:					
EX		Name of Supervisor								
ORK	Ш	Name of Company	From To Month Year Month Year		Summarize the Work You Did: Position:		Reason for Leaving:			
>		Address								
		Phone Number	Starting Salary	Last Salary	Duties:					
		Name of Supervisor								
	IV	Name of Company	From Month Year	To Month Year	Summarize	the Work You Did:	Reason for Leaving:			
). 		Address		Annual Control of the	Position:	WOONALD TO THE RESIDENCE OF THE PERSON OF TH				
		Phone Number	Starting Salary	Last Salary	Duties:					
		Name of Supervisor	I.	L						

May we contact the employers listed above?

Yes

No

If no, indicate by # which one(s) you do not wish us to contact ____

ICE/CLERICAL	Yes	No								
ng			WPM	-					Totism was a	
outer Hardware			701							
outer Software			Programs include:							
skills:							and the second s			
ages that you unde	rstand and de air," or "Flue	esignate your nt."	ability, for each, to Speak, Re	ad		Speak		Read	Write	
nere any other expe	eriences, skill	s or qualifica	cions which you feel would co	ntribute to	the po	osition for	which y	ou are applying?		
chool	Name &	Address	Course of Study				d I	Did you Graduate	Diploma or Deg	
IGH	2 33300	-5		_ 1	2	3 4	[Yes No		
OLLEGE				1	2	3 4	[☐ Yes ☐ No		
	Presently E	nrolled?	Yes No	-,						
THER				_ 1	2	3 4		Yes No		
	Presently Er	nrolled?	Yes No							
st job-related hono	ors and activit age, marital	cies (including status, disabi	g offices held). You may omit ity and any other characteristi	c protecte	d by ap	oplicable l	aw.			
Name and Occupation			Address	Address					Phone Number	
	chool CTIVITIES St job-related honoigin, ancestry, sex,	outer Hardware	outer Hardware	puter Hardware	puter Hardware	puter Hardware	puter Hardware	outer Hardware	outer Hardware Platforms include:	

Signature of Applicant

Date of Application