



DISCOUNT DRUG MART, INC.
APPLICATION FOR EMPLOYMENT

The Stores That Save You The Runaround!

Date of Application: _____

AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE PRINT CLEARLY AND FILL IN ALL INFORMATION)

Name: _____
(Last) (First) (Middle)

Address: _____
(Number) (Street) (City) (State) (Zip Code)

Telephone: (_____) Social Security Number: _____

How long have you lived at this address: _____ Years _____ Months

Are you at least 18 years of age? Yes _____ No _____.

Are you legally eligible for employment in this country? Yes _____ No _____. (Proof of U.S. citizenship or immigration status will be required upon employment.)

Do you have any duties or responsibilities which may interfere with your employment at Discount Drug Mart? _____
If yes, please describe _____.

Motor vehicle operator's number and state licensed: _____.

Have you been convicted of a felony in the last seven years? Yes _____ No _____.
(Such conviction may be relevant if job related, but does not bar you from employment.)

If so, please explain: _____.

Have you completed an application here before? Yes _____ No _____. If Yes, give date _____.

Have you ever been employed by Discount Drug Mart? Yes _____ No _____. If Yes, give date _____.

Location _____ Managers Name _____.

Reason for leaving _____.

Are you acquainted with any employee of Discount Drug Mart? Yes _____ No _____.
If so, who is it: _____ Location employed: _____.

Have you ever been bonded? Yes _____ No _____. If yes, where and when. _____

Have you ever been denied a bond or had a bond revoked? Yes _____ No _____.

If so, please explain: _____

Are you employed now? Yes _____ No _____.

If no, explain: _____

May we contact your present employer? Yes _____ No _____.

If yes, work number: (_____) Best time to call: _____ DAY _____ TIME

Position(s) Applied For: _____

Full time _____ Part time _____ Days _____ Evenings _____ How many hours per week could you work? _____

Referral Source: Advertisement Friend Relative Walk-in
 Employment Agency Other _____

On what date would you be available for work? _____

Minimum Salary Acceptable: _____

Since Discount Drug Mart stores are open every day, the job for which you are applying may require work on weekends and holidays. While reasonable accomodations can be made for you, are you willing to work such schedule? Yes _____ No _____.

Summarize special skills and qualifications acquired from employment or other experience (computer experience, etc.):

List business machines or other equipment which you can operate: _____

Do you smoke? Yes _____ No _____.

State any additional information you feel may be helpful to us in considering your application.

Employment Experience
(Begin with most recent)

1

Employer	<u>Dates Employed</u>		Phone
	From	To	
Address			Work Performed
Job Title	<u>Hourly Rate/Salary</u>		
	Starting	Final	
Supervisor			
Reason for Leaving			
If there is a lapse between jobs, explain:			

2

Employer	<u>Dates Employed</u>		Phone
	From	To	
Address			Work Performed
Job Title	<u>Hourly Rate/Salary</u>		
	Starting	Final	
Supervisor			
Reason for Leaving			
If there is a lapse between jobs, explain:			

3

Employer	<u>Dates Employed</u>		Phone
	From	To	
Address			Work Performed
Job Title	<u>Hourly Rate/Salary</u>		
	Starting	Final	
Supervisor			
Reason for Leaving			
If there is a lapse between jobs, explain:			

4

Employer	<u>Dates Employed</u>		Phone
	From	To	
Address			Work Performed
Job Title	<u>Hourly Rate/Salary</u>		
	Starting	Final	
Supervisor			
Reason for Leaving			
If there is a lapse between jobs, explain:			

Education

	Elementary	High	College/ University	Graduate/ Professional
School Name				
Years Completed: (Circle)	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course Of Study:				
Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities				

Agreement

I certify that answers given herein are true and complete to the best of my knowledge and I understand that any false or misleading information given in my application or interview(s) is grounds for refusal to hire or, if hired, for dismissal.

I acknowledge that, if hired, my employment may be terminated by me or by the Company at any time, with or without cause, and with or without prior notice. I understand that this application is not and is not intended to be a contract of employment.

In consideration for my being considered for employment and my employment, if hired, I agree to conform to the rules and regulations of the Company and acknowledge that these rules and regulations may be changed, interpreted, withdrawn, or added to by the Company at any time, in the Company's sole option, without any prior notice to me.

I acknowledge that this application will remain active for no more than ninety (90) days from the date it was made.

In connection with our consideration of you for employment, we may obtain a consumer report (credit report) from a consumer credit reporting agency.

In some instances we may obtain an investigative consumer report. In making this application for employment I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made.

Signature of Applicant

Date