

Golden Nugget Antique Flea Market

1850 River Road-Lambertville, NJ 08530
 Telephone (609) 397-0881 Facsimile (609) 397-1991
 E-mail: info@gnflea.com

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

APPLICATION FOR EMPLOYMENT

Date _____

Name _____ Home Phone _____

Address _____ Work Phone _____

Are you at least 18 years old? _____ Yes _____ No E-mail address _____

Position Applying for _____ Social Security No. _____

Emergency Contact Name: _____

Phone _____

Are you willing to work:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	How long do you plan to work? (check one)	<input type="checkbox"/> Temporary, <input type="checkbox"/> Summer	<input type="checkbox"/> 1 Year <input type="checkbox"/> More than 1 year
Are you employed at present?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you currently on a leave of absence or lay off from any company?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Please list days and hours available to work:

EDUCATION

High School	Name		
	Location	Graduated?	Credits:
College/ University	Name		
Undergrad.	Location	Graduated?	Credits:
	Degree or Certificate	Major	
College/ University	Name		
Graduate	Location	Graduated?	Credits:
	Degree or Certificate	Major	
Other	Name		
	Location	Graduated?	Credits:
	Degree or Certificate	Major	

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

Have you ever been employed here before? Yes No If Yes, give date _____

AN EQUAL OPPORTUNITY EMPLOYER

EXPERIENCE (Start with Most Recent Employer) -- May we contact your current employer? Yes No

Company Name Position Held		Phone No:
Responsibilities		Dates Employed: From: To:
Reason For Leaving	Name Of Supervisor	Salary Start: End:
Company Name Position Held		Phone No:
Responsibilities		Dates Employed: From: To:
Reason For Leaving	Name Of Supervisor	Salary Start: End:
Company Name Position Held		Phone No:
Responsibilities		Dates Employed: From: To:
Reason For Leaving	Name Of Supervisor	Salary Start: End:
Company Name Position Held		Phone No:
Responsibilities		Dates Employed: From: To:
Reason For Leaving	Name Of Supervisor	Salary Start: End:

REFERENCES (Business/Professional Other Than Former Supervisors) -- These People May Be Contacted

Name	Address/Zip	Phone #	Occupation	Years

Have you ever been convicted of a crime? Yes ___ No ___

If yes, please explain

Can you legally work in the U.S.? Yes ___ No ___

*Proof of citizenship or immigration status will be required upon employment.

Have you ever been discharged or forced to resign from a position? Yes ___ No ___

If yes, please explain

IMPORTANT -- PLEASE READ AND SIGN THE FOLLOWING:

Applicant hereby certifies that the answers to the foregoing questions are true and correct. I agree if the information is found to be false in any respect including omission of information, I will be subject to dismissal without notice at any time. The applicant understands employer is relying upon applicant's answers and the answers are made as an inducement to employer to hire applicant. I authorize you to investigate all information in this application. I hereby authorize my former employers to release information pertaining to my work record, habits and performance. Should I become an employee, I understand that my employment will be for no definite term, such that I will enjoy the right to terminate my employment at any time, at my convenience, with or without cause or reason. I further understand that the Company will have the same right. This status can only be modified if such modification is in writing and signed by both me and the President of the Company.

I hereby further acknowledge that I am expected to abide by all Company rules and regulation, written or unwritten, promulgated by the Company or my supervisor, but that such rules and regulations do not create a contract between me and the Company or otherwise restrict the right of either me or the Company to terminate the employment relationship at any time. I understand that these rules and regulations may be subject to change at any time. I understand and agree any handbook which I may receive will not constitute an employment contract, but will be a statement of the company's current policies.

Employment decisions are made solely on the basis of qualifications to perform the work for which you are applying. Qualifications include education, training, work experience and other factors which are relevant in determining job performance. Credentials and experience may be verified through schools, former employers and licensing/certification agencies, if applicable. As an Equal Opportunity Employer, decisions to hire and promote are made without regard to race, color, creed, national origin, sex, physical or mental disability or age (as defined by law).

I understand that before any offer of employment is finalized, I may be required to submit to a urine drug screen, at a Company selected medical facility at the Company's expense. If the test results demonstrate the presence of illegal drugs or non-prescribed controlled substances, I understand that I will not be permitted to commence work. I voluntarily consent for the designated medical facility to collect a urine sample from me and to have it tested for the presence of drugs and controlled substances. Further, the testing laboratory is authorized to release the results of the test to the Golden Nugget Flea Market. The Golden Nugget Flea Market is authorized to communicate the test results internally, as it deems appropriate. This application for employment shall be considered active for a period of time not to exceed 45 days.

Signature: _____ Date: _____

By Filling in your full name above you are legally signing this documet.

INVESTIGATIVE REPORT AUTHORIZATION AND RELEASE

All positions are considered "sensitive", thereby requiring a mandatory and comprehensive pre-employment investigation including but not limited to our requesting from the N. J. State Police a criminal history record check. Any offer of employment for a position will be contingent upon an acceptable outcome. If you are hired, we may also need to conduct a follow-up investigation within two years. If we make an unfavorable determination, then any previous offer of employment will be revoked even if you already started work.

CONSENT AND UTHORIZATION

I hereby authorize Golden Nugget Flea Market, their associates, and any other company that the Management has an interest in, to obtain among other things, a N. J. State Police criminal history record check on me and my motor vehicle driving records at anytime within the next two years. I further authorize any employer, former employer, consumer reporting agency or any other custodian of professional information regarding me to release all data respecting my salary, duties, personal and professional behavior.

I release from all liability and responsibility the above mentioned companies, affiliates, and those parties supplying the information, and understand they will protect the confidentially of personal information, other than past and present employment information, and such information will not be disclosed outside without my consent or as otherwise required by law. I acknowledge that I have read and understand the notices above. A photocopy of this authorization shall be deemed as valid as the original and this authorization shall remain in full force and effect for a time period of two years from the date hereof.

Date _____ Signature

By Filling in your full name above you are legally signing this document

FOR Market's USE ONLY:

_____ Written Reference
_____ Written Reference

Completed Application ____
I-9 ____
W-4 ____
Staff Handbook ____