

#### **Application for Employment**

PERSONAL INFORMATION:		Date:				
Position for which you are applying	3:	Full	Part Time			
Last Name Fir	st Name	Middle Initial		(Former / Maiden Name)		
Street Address	City	State		Zip Code		
Contact Phone Number(s)		Contact E-Ma	ail Address			
Can you provide verification of you Are you 18 years of age or older?	☐ Yes ☐ No	the U.S.?   Yes  ON AND TRAINING	□ No			
College, University, Trade or Business Schools	City, State of Campus	Degree/Diploma A Hours Earned	Major Area of Study			
Proof of your degree may be requi Other Training, including Military:	red upon hire.					
Name and Location of Institutio	n Topic o	of Training		Diploma/Certificate		
	EMPLO	YMENT HISTORY				
Have you ever been dismissed or a unsatisfactory service?   employer's decision:	☐ No If yes, describe t	he circumstances eve	en if you di	r misconduct or id not agree with your		

List all employers for the past ten (10) years beginning with the most recent first. Account for all time employed, including self-employment. If you need additional space, please use back page. **Hours Per Week Dates Worked** From (Mo/Yr) To (Mo/Yr) **EMPLOYER SALARY OTHER** Company Name: Position: Starting: Ending:

Per week, month year Address: **Duties:** Supervisor's Name: Company Phone Number: Reason for Leaving: If presently employed, may we contact your employer?  $\square$  Yes **Hours Per Week** From (Mo/Yr) To (Mo/Yr) **Dates Worked SALARY OTHER EMPLOYER** Company Name: Starting: Position: Ending: Per week, month year Address: **Duties:** Supervisor's Name: Company Phone Number: Reason for Leaving: **Hours Per Week** From (Mo/Yr) **Dates Worked** To (Mo/Yr) **EMPLOYER** OTHER SALARY Company Name: Starting: Position: Ending: Per week, month year Address: **Duties:** Supervisor's Name: Company Phone Number: Reason for Leaving: **Hours Per Week Dates Worked** From (Mo/Yr) To (Mo/Yr) **EMPLOYER SALARY OTHER** Company Name: Starting: Position: Ending: Per week, month year Supervisor's Name: Address: **Duties:** Company Phone Number: Reason for Leaving:

## **GENERAL:** Job Related Skills (framing, retail, customer service, computer experience, etc): Craftsperson and power tool experience: Why would you like to work at USA Hall of Frames, Inc.? Describe any experiences you have had which you think might be helpful in picture framing: Picture framing requires high levels of concentration, accuracy and attention to detail, as well as the ability to work under a deadline, problem solve and act as a team member. Please relate any experiences you have had that would lend themselves to becoming a successful picture framer: Are you good at math? \_\_\_\_\_ Are you mechanically inclined? \_\_\_\_ Are you creative? \_\_\_\_\_ Are you good at problem solving? \_\_\_\_\_ Can you work without supervisor? \_\_\_\_\_ Can you follow instructions even if you disagree with them? \_\_\_\_\_ Do you like to work with the public? \_\_\_\_\_ Are you interested in management opportunities? \_\_\_\_\_ Do you have adequate transportation and/or transportation arrangement to get to and from work.? $\square$ Yes $\square$ No Do you have restriction as to what days or hour per day you can work? $\square$ Yes $\square$ No

If yes, what are your restrictions: \_\_\_\_\_

Have you ever applied to Hall of Frames/Paradise Picture Frame before?  $\square$  Yes  $\square$  No When?

Have you ever worked for Hall of Frames/Paradise Picture Frame before? ☐ Yes ☐ No When?

#### **Conditions of Consideration For Employment**

All information contained on the application is subject to verification. If applicable, Hall of Frames may conduct background checks including, but not limited to, work references, criminal conviction records and educational attainment.

You may be subjected to a criminal background investigation for some positions. All offers of employment and continued employment may be subject to a complete review of any criminal convictions you may have. Your failure to make a full and accurate disclosure of any prior conviction(s), or to answer the questions fully and accurately, may result in immediate termination from employment or the rejection of any pending application or offer from Hall of Frames.

#### **Criminal Background Information**

ALL QUESTIONS MUST BE ANSWERED TRUTHFULLY AND COMPLETELY. "Crime" as used in this section means any and all felonies, misdemeanors and serious driving offenses, including but not limited to driving while under the influence of intoxicating liquor ("DUI") or drugs, extreme DUI, reckless driving, aggressive driving, racing/exhibition of speed, excessive (criminal) speed, leaving the scene of an accident, driving on a suspended, revoked or refused license or any other driving offense that is a misdemeanor (i.e., possible penalty for conviction includes imprisonment or jail time). "Crime" does not include minor (civil) traffic offenses. If you are not sure how to answer these questions, please ask a member of management for assistance.

"Convicted" means you have been found guilty of a crime by a court or jury, or have pleaded guilty or nolo contendere ("no contest") to a crime and have been sentenced for a crime, whether imprisoned, incarcerated, placed on probation, fined or received a suspended sentence.

A criminal conviction(s) may or may not constitute an automatic disqualification for employment.

Have	you	ever	been	convicted	of	any	crime?	Answer	by	writing	"Yes"	or	"No" _	
If you	have	answei	ed "yes	" to this qu	estio	n, ple	ease give	the detail	s of	offense(s)	for wh	ich (	convicted	date(s) of
convic	tion(s)	, jurisd	iction(s)	(court, city,	coun	ity, sta	ate, feder	al, foreign	or n	nilitary), ar	nd dispo	sitio	n(s) on th	e "Criminal
Convic	tion H	istory S	Supplem	ent" at the e	nd of	f the a	applicatio	n. Exclude	ticke	ets for min	or traffi	c and	d parking v	iolations.

I certify that all the information provided herein is true and complete to the best of my knowledge. I agree and understand that omissions, misstatements and falsifications may cause forfeiture on my part of all eligibility to any employment with Hall of Frames and may be cause for rejection of this application or dismissal from employment. In addition, I give the Hall of Frames the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency, individual or educational institution assisting the company in providing relevant, job related information that will assist in the process.

My signature below certifies that I have read and understand this application and agree to the terms and conditions outlined in this document.

Applicant's Signature	Date
Print Name	

Persons with a disability may request a reasonable accommodation. Requests should be made as early as possible to allow time to arrange the accommodation.

#### **CRIMINAL CONVICTION HISTORY SUPPLEMENT**

If you have ever been convicted of any crime, please give the details of the offense(s) for which convicted, date(s) of conviction(s), jurisdiction(s) (court, city, county, state, federal, foreign, military), and disposition(s). Please see page 1 for definition of "crimes."

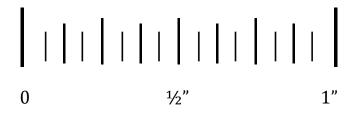
DATE	CONVICTION	MISDEMEANOR OR FELONY	DISPOSITION	LAW ENFORCEMENT AGENCY	CITY/ STATE/ COUNTY	OTHER FEDERAL, FOREIGN MILITARY

Accuracy in measurement is a crucial function in picture framing. Store management, salespersons, designers, picture framers and warehouse staff all use math daily on the job.

The math test is optional for office / clerical applicants.

#### Please, answer the following:

#### Please label all fractional marks on the following ruler:



#### Compute the following equations:

A	dd:	Divide:	Multiply
11 9/16	2 1/4	<u>16 7/8</u> =	3 7/8 x 2 =
+ 21 5/8	4 3/4	2	
	1 1/8		
	4 3/4		
	+ 2 1/4	<u>3/4</u> =	$1 \frac{1}{2} \times 3 =$
		4	

# This Organization Participates in E-Verify

### Esta Organización Participa en E-Verify



This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S.

If E-Verify cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact Department of Homeland Security (DHS) or Social Security Administration (SSA) so you can begin to resolve the issue before the employer can take any action against you, including terminating your employment.

Employers can only use E-Verify once you have accepted a job offer and completed the Form I-9

#### **E-Verify Works for Everyone**

For more information on E-Verify, or if you believe that your employer has violated its E-Verify responsibilities, please contact DHS.

Este empleador participa en E-Verify y proporcionará al gobierno federal la información de su Formulario I-9 para confirmar que usted está autorizado para trabajar en los EE.UU..

Si E-Verify no puede confirmar que usted está autorizado para trabajar, este empleador está requerido a darle instrucciones por escrito y una oportunidad de contactar al Departamento de Seguridad Nacional (DHS) o a la Administración del Seguro Social (SSA) para que pueda empezar a resolver el problema antes de que el empleador pueda tomar cualquier acción en su contra, incluyendo la terminación de su empleo.

Los empleadores sólo pueden utilizar E-Verify una vez que usted haya aceptado una oferta de trabajo y completado el Formulario I-9.

#### **E-Verify Funciona Para Todos**

Para más información sobre E-Verify, o si usted cree que su empleador ha violado sus responsabilidades de E-Verify, por favor contacte a DHS.

**888-897-7781** dhs.gov/e-verify



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