

## **EMPLOYMENT APPLICATION**

**Equal Opportunity Employer** 

## **Personal Information**

COLLEGE/UNIVERSITY

TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL

NAME (LAST NAME / FIRST)							TODAY'S DATE					
PRESENT ADDRESS			CITY				STATE	ZIP CODE				
PHONE NO.	SI	ECONDARY PHONE NO.	REFERRED BY									
Employment Desired												
POSITION	DATE YOU CAN START					SALARY DESIRED						
TOSITION	DATE 100 CAN START					SALAKT DESIKED						
ARE YOU EMPLOYED NOW?						EGALLY AUTHORIZED N THE U.S.? □ YES □ NO						
HAVE YOU EVER APPLIE WORKED FOR PACIFIC OBEFORE?	RELA				OU HAVE ANY FRIENDS OR ATIVES WORKING FOR PACIFIC FITTERS?							
ARE THERE TIMES/DAYS WHICH YOU ARE UNAVAILBALE TO WORK? (Please attach your schedule if more space is needed).  IF YES, STATE NAME(S) & RELATION								LATIONSH	ΙP			
WHY ARE YOU APPLYING FOR WORK AT PACIFIC OUTFITTERS?												
Questionnaire												
IF HIRED, WOULD YOU HAVE A RELIABLE MEANS OF TRANSPORTATION TO AND FROM WORK?  YES NO										)		
ARE YOU AT LEAST 18 YEARS OLD? (IF UNDER 18, HIRE IS SUBJECT TO VERFICATION THAT YOU ARE OF MINIMUM LEGAL AGE.)  YES NO									)			
ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING, EITHER WITH OR WITHOUT REASONABLE ACCOMMODATION?  YES NO										)		
IF NO, DESCRIBE THE FUNCTIONS THAT CANNOT BE PERFORMED:												
(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)											s.)	
Education, Training	g, and Experie	nce										
	NAME (	& LOCATION OF SCHO	OL	Y	IBER OF EARS TENDED		YOU UATE?	DEGREE OR DIPLOMA				
HIGH SCHOOL												
· · · · · · · · · · · · · · · · · · ·												

General Information												
SUBJECT OF SPECIAL STUDY/RESEARCH WORK												
SPECIAL SKILLS OR TRAINING												
U.S MILITARY SERVICE			RANK									
	employment starting with your most plete this section even if attaching a		t five years	s is sufficient). Account for all periods of								
COMPANY NAME		PHONE		SUPERVISOR NAME								
ADDRESS	POSITION											
YOUR JOB DUTIES												
FROM	REASON FOR LEAVING			MAY WE CONTACT THIS EMPLOYER FOR A REFERENCE?								
ТО				□ YES □ NO								
COMPANY NAME	PHONE		SUPERVISOR NAME									
ADDRESS	POSITION											
YOUR JOB DUTIES												
FROM	REASON FOR LEAVING		I	AY WE CONTACT THIS EMPLOYER FOR A EFERENCE?								
ТО	□ YES □ NO											
COMPANY NAME	PHONE		SUPERVISOR NAME									
ADDRESS	POSITION											
YOUR JOB DUTIES												
FROM	REASON FOR LEAVING			IAY WE CONTACT THIS EMPLOYER FOR A EFERENCE?								
ТО				□ YES □ NO								
References (List below the	ee persons not related to you who hav	ve knowledge of your	work parfa	ormance within the last three years								
NAME	ADDRESS	OCCUP		PHONE NUMBER YEARS KNOWN								

## Please Read Carefully, Initial Each Paragraph and Sign Below I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for **Initials** employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize Pacific Outfitters to thoroughly investigate my references, work record, education and other **Initials** matters related to my suitability for employment unless otherwise specified above. Further, I authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all others persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I understand that nothing contained in the application, or conveyed during any interview which may be granted **Initials** or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative. In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the **Initials** United States and to complete the required employment eligibility verification document form upon hire. Pacific Outfitters personnel are employed on an at-will basis. Employment at-will means that the employment **Initials** relationship may be terminated, with or without cause and with or without advance notice, at any time by the employee or the Company. I understand that Pacific Outfitters is a firearms dealer and that its employees are required to obtain a "Certificate of Eligibility" from the Department of Justice. Persons who may be prohibited from obtaining a **Initials** Certificate of Eligibility are those who 1. Have been convicted of a criminal offense (felony or misdemeanor) in the past 10 years, excluding misdemeanor convictions for marijuana-related offenses that are more than two years old, infractions, records relating to diversion programs, or convictions that have been judicially dismissed or ordered sealed pursuant to law; and 2. Are prohibited from owning and/or possessing firearms, such as any person who has a conviction for any misdemeanor listed in Penal Code section 29805 or for any felony, or is addicted to the use of any narcotic drug, or has been held involuntarily as a danger to self or others pursuant to Welfare and Institutions Code section 8103 is prohibited from buying, owning, or possessing firearms or ammunition. There are also prohibitions based on mental conditions, domestic restraining/protective orders, conditions of probation, and specific offenses committed as a juvenile. A list of prohibited categories is available on the Bureau of Firearms website.

Date

Applicant's Signature