We at Plato’s Closet® are committed to a policy of equal treatment and opportunity in every aspect of our employment relations without regard to race, color, religion, sex, national origin, age, disability, genetic information or any other legally protected class status. This includes, but is not limited to, recruiting, hiring selection for training, transfers, promotion, compensation, and any company sponsored social and recreational programs. Each Plato’s Closet is independently owned and operated.
Name __________________________________ Date ______________________________________

Present Address ___________________________________________________________________________________________________________
Street     City  State   Zip

Email (optional) ___________________________ Social Security # ___________________________ Telephone (___) ___________________________

Referred by Advertisement Agency Person Other _________________________________________________

Are you legally eligible for employment in the U.S.A.? Yes No State age if under 18 ___________________________________

Position applying for _______________________________________________________________ Salary expected _________________

Are you available to work Full-time Part-Time Specify schedule limitations ___________________________________

Date available for work __________________________ List friends or relatives in our employ __________________________

Were you previously employed by us? Yes No If yes, when ____________________________________________

Other name(s) used while attending schools or places of employment indicated on this form ____________________________

Can you perform the functions of this job with or without reasonable accommodations?
Yes No If No, please explain: ___________________________________________________________________________________

Have you ever been convicted of a felony? Yes No If yes, please explain: (Note - A conviction alone will not automatically bar you from employment.) ___________________________________________________________________________

Military Service? Yes No Branch of service and rank ___________________ Dates of Service ____________________________

Special Training _____________________________________________________________

EDUCATION

<table>
<thead>
<tr>
<th>Name and Location</th>
<th>Course of Study</th>
<th>Scholastic Average</th>
<th>Dates of Attendance</th>
<th>Graduated</th>
</tr>
</thead>
<tbody>
<tr>
<td>High School/GED</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>College</td>
<td></td>
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</tr>
<tr>
<td>Vocational</td>
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<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Additional comments regarding education ____________________________

_________________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________
SKILLS

List Computer Software Packages in which you are proficient _____________ What languages do you: speak fluently ________________________________

Cash Register ___________________________ 10-Key _________________ write fluently ________________________________

Other Skills _____________________________________________________ read fluently ________________________________

EMPLOYMENT HISTORY
(List present or most recent employer first)

Name of Company __________________________________ Address ________________________________________________________________

Supervisor _________________________________________ Salary _______________ Phone ____________________________________________

Job Title ________________________________________________________ Date Started __________________ Date Left ________________

Job Description ___________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Reason for Leaving: ________________________________________________________________

Name of Company __________________________________ Address ________________________________________________________________

Supervisor _________________________________________ Salary _______________ Phone ____________________________________________

Job Title _________________________________________________________ Date Started __________________ Date Left ___________________

Job Description ___________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Reason for Leaving: ________________________________________________________________

Name of Company __________________________________ Address ________________________________________________________________

Supervisor _________________________________________ Salary _______________ Phone ____________________________________________

Job Title _________________________________________________________ Date Started __________________ Date Left ___________________

Job Description ___________________________________________________________________________________________________________

________________________________________________________________________________________________________________________________________

Reason for Leaving: ________________________________________________________________

AUTHORIZATION FOR BACKGROUND CHECK: I authorize [insert name of employer] to verify employment, except as noted below, as well as conduct criminal and vehicular record check.

Indicate those you do not wish contacted: ________________________________________________________________

Signed: ______________________________________________________________________________Date: _______________________________
REFERENCES

Please list three persons other than relatives or personal friends, who can judge your work ability.

1) Name _________________________________________________________ Occupation ______________________________________________
   Address ______________________________________________________________________ Phone ____________________________________

2) Name _________________________________________________________ Occupation ______________________________________________
   Address ______________________________________________________________________ Phone ____________________________________

3) Name _________________________________________________________ Occupation ______________________________________________
   Address ______________________________________________________________________ Phone ____________________________________

Please use the space provided below to summarize any additional information necessary to fully describe your qualifications.

_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________

● PLEASE READ ●

All information written on this application is complete and accurate to the best of my knowledge. I understand that any misrepresentation of facts in this application disqualifies me from further consideration - or if employed - is grounds for dismissal. I understand that any employment offer is contingent upon satisfactory references and I authorize Plato’s Closet® to investigate past employment and education history, as well as references given on application.

I understand that if employed such employment may be terminated for just cause, or no cause, by Plato’s Closet® or myself at any time. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its Owner, and then only when in writing and signed by the Owner, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

I fully understand and agree to all statements above.

_______________________________________________________   _________________________________________________
Signature          Date

OFFICE USE ONLY

Interviewed by _____________________________________________________________________  Date __________________________________

Referral Source ___________________________ Hired Not Hired ___________________________

Starting Date _____________________________________________________________________ Position ________________________________________________ Salary _____________________

Location ______________________________________            Reporting To ___________________________