



EMPLOYMENT APPLICATION

EQUAL OPPORTUNITY EMPLOYER

- STORE LEADERSHIP (FULL-TIME) SUBMIT TO: DISTRICT MANAGER
 TEAM MEMBERSHIP (PART-TIME) SUBMIT TO: STORE MANAGER
 LOGISTICS (NJ WAREHOUSE) SUBMIT TO: NJ LOGISTICS SUPERVISOR
 CORPORATE (NJ HEADQUARTERS) SUBMIT TO: NJ ADMINISTRATIVE OFFICE

SECTION 1. PERSONAL INFORMATION

LAST NAME _____ FIRST NAME _____ MI _____

CURRENT ADDRESS _____
 STREET _____ CITY _____ STATE _____ ZIP _____

DAY PHONE (_____) - _____ EVENING PHONE (_____) - _____

ARE YOU OVER 16? YES NO ARE YOU OVER 18? YES NO

ARE YOU A U.S. CITIZEN OR PERMANENT RESIDENT? YES NO ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? YES NO

IN CASE OF AN EMERGENCY CONTACT:

NAME _____ DAY PHONE (_____) - _____ EVENING PHONE (_____) - _____

RELATIONSHIP _____

SECTION 2. EMPLOYMENT DESIRED & AVAILABILITY

POSITION _____ START DATE ____/____/____ DESIRED PAY \$ _____ PER _____

HAVE YOU EVER APPLIED TO P.C.X.? YES NO HAVE YOU EVER BEEN EMPLOYED BY P.C.X.? YES NO

LOCATION: _____ DATE: _____ LOCATION: _____ DATE: _____ REF: _____

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY

PLEASE INDICATE ALL THE HOURS YOU ARE AVAILABLE TO WORK. IF AVAILABLE ANY TIME DURING A DAY, INDICATE "OPEN." PRIORITY DAYS WHEN YOU ARE NOT AVAILABLE, PLEASE INDICATE "N/A."

SECTION 3. EDUCATIONAL BACKGROUND

SCHOOL NAME & LOCATION	GRADUATED	DEGREE EARNED
SPECIAL TRAINING, SKILLS, CERTIFICATION, ACTIVITIES & LEADERSHIP POSITIONS HELD	DATE	POSITION
1. _____		
2. _____		
3. _____		

SECTION 4. EMPLOYMENT HISTORY

ARE YOU CURRENTLY EMPLOYED? IF SO, WHERE? _____

POSITION _____

ADDRESS: _____

CURRENT PAY \$ _____ PER _____

WILL YOU BE SUBMITTING A RESUME? YES NO

WILL YOU BE SUBMITTING ANY OTHER ATTACHMENTS? YES NO

IF SO, WHAT OTHER ATTACHMENTS WILL YOU BE SUBMITTING? _____

SECTION 4. EMPLOYMENT HISTORY (CONTINUED)

PLEASE LIST YOUR (3) MOST CURRENT EMPLOYMENT EXPERIENCES:

EMPLOYER (COMPANY)		ADDRESS OF EMPLOYMENT			PHONE NUMBER	
POSITIONS HELD	DUTIES & RESPONSIBILITIES	DATES OF EMPLOYMENT		BASE RATE OF PAY		
		START	END	STARTING	ENDING	
REASON FOR LEAVING	REFERENCE NAME	REFERENCE POSITION	REFERENCE CONTACT INFORMATION			
EMPLOYER (COMPANY)		ADDRESS OF EMPLOYMENT			PHONE NUMBER	
POSITIONS HELD	DUTIES & RESPONSIBILITIES	DATES OF EMPLOYMENT		BASE RATE OF PAY		
		START	END	STARTING	ENDING	
REASON FOR LEAVING	REFERENCE NAME	REFERENCE POSITION	REFERENCE CONTACT INFORMATION			
EMPLOYER (COMPANY)		ADDRESS OF EMPLOYMENT			PHONE NUMBER	
POSITIONS HELD	DUTIES & RESPONSIBILITIES	DATES OF EMPLOYMENT		BASE RATE OF PAY		
		START	END	STARTING	ENDING	
REASON FOR LEAVING	REFERENCE NAME	REFERENCE POSITION	REFERENCE CONTACT INFORMATION			

ADDITIONAL INFORMATION

- o HAVE YOU EVER BEEN CHARGED OR CONVICTED OF A FELONY? YES NO
- o IF YES, PLEASE EXPLAIN _____
- o HAVE YOU EVER BEEN DISMISSED OR FORCED TO RESIGN FROM ANY EMPLOYMENT? YES NO
- o IF YES, PLEASE EXPLAIN _____

APPLICANT'S STATEMENT OF UNDERSTANDING AND COMPLIANCE

PLEASE READ THE FOLLOWING STATEMENT OF UNDERSTANDING AND COMPLIANCE BEFORE SIGNING. ONLY APPLICATIONS THAT ARE SIGNED AND DATED WILL BE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING ANY PORTION OF THIS APPLICATION, PLEASE ASK BEFORE YOU SIGN.

I ATTEST THAT ALL INFORMATION PROVIDED IN THIS APPLICATION AND ANY ATTACHMENT/ADDITION TO THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE. I AGREE THAT ANY FALSE STATEMENT, MISREPRESENTATION OR OMISSION WILL RESULT IN IMMEDIATE DISQUALIFICATION OF MY APPLICATION. IF ANY STATEMENT IS FOUND TO BE FALSE, MISPRESENTED OR OMMITED UPON HIRING, I UNDERSTAND THAT I WILL BE IMMEDIATELY TERMINATED WITH NO FURTHER COMPENSATION IN ANY FORM WHATSOEVER. I ALSO UNDERSTAND FOR EMPLOYMENT PURPOSES, INVESTIGATIVE BACKGROUND INQUIRIES MAY BE REQUIRED AND WILL BE CONDUCTED AS DEEMED APPROPRIATE BY P.C.X MANAGEMENT. I AUTHORIZE ALL PERSONS, SCHOOLS, EMPLOYERS AND OTHER ORGANIZATIONS NAMED IN THIS APPLICATION TO PROVIDE P.C.X. WITH RELEVANT INFORMATION CONCERNING MY PROSPECTIVE OR CURRENT EMPLOYMENT. BY SIGNING THIS APPLICATION, I ACKNOWLEDGE HAVING BEEN GIVEN NOTICE THAT P.C.X., INC. HAS THE RIGHT TO RELEASE INFORMATION TO ANY PERSON, PARTY OR GOVERNMENTAL AGENCY AS GOVERNED BY LAW.

IF EMPLOYED BY P.C.X., I WILL ABIDE BY THE COMPANY'S POLICIES, RULES AND STANDARDS OF CONDUCT. I UNDERSTAND IF EMPLOYED, MY EMPLOYMENT IS "AT-WILL" AND THE EMPLOYMENT RELATIONSHIP MAY BE TERMINATED, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT THE COMPANY'S OR MY SOLE DISCRETION. ONLY THE PRESIDENT OF P.C.X. MAY AT ANY TIME MAKE AN AGREEMENT CONTRARY TO THE FOREGOING STATEMENT, AND THEN ONLY IN WRITING SIGNED BY BOTH THE APPLICANT AND THE PRESIDENT OF P.C.X. I UNDERSTAND THAT THIS APPLICATION DOES NOT CONSTITUTE A CONTRACT OF EMPLOYMENT.

MY SIGNATURE BELOW CERTIES THAT I AGREE TO BE BOUND BY THE TERMS & CONDITIONS STATED ON THIS APPLICATION. I UNDERSTAND AND AGREE THAT NO PERSON WHO IS EITHER AN AGENT OR EMPLOYEE OF P.C.X. MAY MODIFY, DELETE, VARY OR CONTRADICT, WHETHER ORALLY OR IN WRITING, EXPRESSED OR IMPLIED, THE TERMS AND CONDITIONS OF EMPLOYMENT SET FORTH HEREIN, EXCEPT WITH WRITTEN, SIGNED AUTHORIZATION FROM THE PRESIDENT OF P.C.X.

SUBMIT THIS APPLICATION TO THE APPROPRIATE STAFF MEMBER LISTED NEXT TO THE "SUBMIT TO" FIELD AT THE BEGINNING OF THE APPLICATION, BELOW THE CORRESPONDING POSITION BEING APPLIED FOR. ANY OTHER FORM OF SUBMITTANCE MAY NOT BE EVALUATED. FOR MANAGEMENT POSITION INQUIRIES/QUESTIONS, EMAIL PCXAPPLICATIONS@GMAIL.COM FOR MORE INFORMATION.

APPLICANT'S SIGNATURE _____ DATE _____

IF A MINOR (UNDER 18 YEARS OF AGE), PLEASE PROVIDE A LEGAL GUARDIAN'S SIGNATURE BELOW:

GUARDIAN'S SIGNATURE _____ DATE _____

MUST BE COMPLETED AND SIGNED AFTER HIRE		
DATE HIRED (M/D/Y):	STORE CODE:	SOCIAL SECURITY NUMBER:
POSITION:	F/T, P/T, SEASONAL:	START DATE:
HIRED BY:	REFERENCES COMPLETED BY:	STARTING RATE OF PAY (\$ / TERM):
HIRING MANAGER SIGNATURE:		EMPLOYEE SIGNATURE: