

EMPLOYMENT APPLICATION

An equal opportunity employer, C.O. Bigelow does not discriminate in hiring or terms and conditions of employment because of an individual's race, color, religion, gender, gender identity, national origin, citizenship, age, disability, sexual orientation, marital status or any other protected category recognized by state or federal laws. C.O. Bigelow only hires individuals authorized for employment in the United States.



Position Desired: _____

Schedule Desired: Full Time Part Time
 Temporary/Seasonal

Salary Expected: \$ _____ per _____

Date Available: _____ / _____ / _____

_____/_____/_____
Date of Application

PERSONAL INFORMATION			
Last Name	First Name	Middle Name	Are you authorized for employment in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
Present Street Address	City	State	Zip
Previous Street Address	City	State	Zip
Home Phone Number (including Area Code)	Email Address		Are you under the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION				
Type of School	Name and Location of School	Degree/Area of Study	Number of Years Attended	Graduated (Check One)
HIGH SCHOOL	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City			
COLLEGE	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City			
OTHER	Name			<input type="checkbox"/> Yes <input type="checkbox"/> No
	City			

EMPLOYMENT HISTORY					
List employment starting with your most recent position. Account for any time during this period that you were unemployed by stating the nature of your activities. If you have less than four places of employment, include personal references to be contacted. May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Dates	Name and Address of Employer	Position Held and Supervisor	List Major Duties	Wages	Reason for Leaving
From: _____ / _____ / _____ Mo. Yr.	Name	Your Job Title		Starting	
To: _____ / _____ / _____ Mo. Yr.	Address	Supervisor		Final	
	Phone				
From: _____ / _____ / _____ Mo. Yr.	Name	Your Job Title		Starting	
To: _____ / _____ / _____ Mo. Yr.	Address	Supervisor		Final	
	Phone				
From: _____ / _____ / _____ Mo. Yr.	Name	Your Job Title		Starting	
To: _____ / _____ / _____ Mo. Yr.	Address	Supervisor		Final	
	Phone				
From: _____ / _____ / _____ Mo. Yr.	Name	Your Job Title		Starting	
To: _____ / _____ / _____ Mo. Yr.	Address	Supervisor		Final	
	Phone				

Have you ever been discharged from a job(s)? Yes No If yes, please provide details, including place(s) of employment, location(s), date(s), supervisor's name(s), and circumstances of the discharge(s):

ACADEMIC AND PROFESSIONAL ACTIVITIES AND ACHIEVEMENTS

Academic and Professional Activities and Achievements, Awards, Publications or Technical-Professional Societies, indicate type or name. Exclude organizations which indicate race, creed, color, sex, sexual orientation, gender identity, age, religion, disability, marital status or national origin of its members.	Date Awarded

SPECIAL SKILLS

Other Skills applicable to position applied for (e.g. computer proficiency)
What other languages do you speak fluently?

MISCELLANEOUS

Is there any additional information involving a change of your name or assumed name that will permit us to check your work record?			
Have you previously been employed by any Limited Brands, Inc. Division? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employment Date(s)	Division(s) Employed	Position(s) Held
List names of any person you know now employed by any Limited Brands, Inc. Division:			
Have you ever been convicted of, or pled guilty to, a crime for which the record has not been expunged or sealed? (In California, your response should not include marijuana convictions that are more than two years old or information concerning referral to, or participation in, a pre- or post-trial diversion program.) If yes, please explain. Answering yes to this question will not necessarily bar you from employment. <input type="checkbox"/> Yes <input type="checkbox"/> No			
At C.O. Bigelow a good attendance record is an important part of every associate's overall performance. Do you know of any reason you may not be able to comply with C.O. Bigelow's attendance policy?			

PERSON TO CONTACT IN CASE OF EMERGENCY

This information is to facilitate contact in the event of any emergency and is not used in the selection process.		
Full Name	Address	Phone
Place of employment	Address	Phone

AVAILABILITY

	SUN	MON	TUE	WED	THUR	FRI	SAT
AM							
PM							

Start date: _____	End date: _____	Min # hours available weekly: _____	Max. # hours available weekly: _____
Available start date: _____	Will you be available to work: Thanksgiving (week) <input type="checkbox"/> Yes <input type="checkbox"/> No Christmas (week prior) <input type="checkbox"/> Yes <input type="checkbox"/> No Christmas (week of) <input type="checkbox"/> Yes <input type="checkbox"/> No Other _____		

PLEASE READ THIS STATEMENT CAREFULLY

I hereby affirm that the information given by me on the application for employment is complete and accurate. I understand that any falsification or omission either on this application, or otherwise providing false information to the Company will be immediate grounds for dismissal, no matter when the falsification or omission is discovered. I authorize a thorough investigation to be made in connection with this application concerning my credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, employment, education, and criminal record, whichever may be applicable for employment purposes. I understand this investigation may include personal interviews with third parties such as family members, business associates, financial sources, friends, neighbors, and others with whom I am acquainted. I further understand I have the right to make a written request within a reasonable period of time for complete and accurate disclosure of the nature and scope of the investigation.

It is my understanding that as a prerequisite to consideration for employment, I must agree to submit to any post-employment examinations, physical or other, as the Company may lawfully require. The Company will pay the reasonable cost of any such examination which may be required.

If I am hired, I agree that my employment and compensation can be terminated with or without cause, and without notice at any time, at the option of C.O. Bigelow or myself. I understand that, unless modified in written agreement signed by both me and the Vice President of Human Resources or the President of C.O. Bigelow, no representative of C.O. Bigelow has the authority to make any agreement for employment for a specified time or to make any other agreement contrary to the foregoing.

I have read and affirm as my own the above statements.

_____	_____
Applicant's Signature	Date

APPLICANTS IN THE STATE OF MARYLAND ONLY

Under Maryland law an employer may not require or demand any applicant for employment or any employee to submit to or take a polygraph, lie detector or similar test or examination as a condition of employment or continued employment. Any employer who violates this law shall be subject to criminal penalties and civil liability.

_____	_____
Applicant's Signature	Date

APPLICANTS IN THE STATE OF MASSACHUSETTS ONLY

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. Any employer who violates this law shall be subject to criminal penalties and civil liability.

_____	_____
Applicant's Signature	Date

APPLICANTS IN THE STATE OF CONNECTICUT ONLY

I agree to be scheduled for less than four (4) hours of work on any given day at C.O. Bigelow, provided the minimum daily pay in every instance shall be at least twice the applicable minimum hourly rate.

_____	_____
Applicant's Signature	Date

FAIR CREDIT REPORTING ACT DISCLOSURE

C.O. Bigelow, when considering your application for employment, when making a decision whether to continue your employment (if you are hired), and when making other employment related decisions affecting you, may wish to obtain and use a consumer report from a consumer reporting agency. As an applicant for employment or employee of C.O. Bigelow, you are a "consumer" with rights under the Fair Credit Reporting Act.

A. NEW YORK ONLY

C.O. Bigelow, when considering your application for employment, when making a decision whether to continue your employment (if you are hired), and when making other employment related decisions affecting you, may wish to obtain and use a consumer report from United Stores Mutual Association, Intellicorp or Secure Point. As an applicant for employment or employee of C.O. Bigelow, you are a "consumer" with rights under the Fair Credit Reporting Act.

Upon request, C.O. Bigelow will inform you whether or not a consumer report was requested and, if a consumer report was requested, you will be informed of the name and address of the consumer reporting agency that furnished the report.

B. CALIFORNIA ONLY

C.O. Bigelow, when considering your application for employment will obtain a consumer report from United Stores Mutual Association, Intellicorp or Secure Point. As an applicant for employment or employee of C.O. Bigelow, you are a "consumer" with rights under the Fair Credit Reporting Act and California Civil Code Section 1785.20.5.

You have the right to receive a copy of the consumer report that is obtained by C.O. Bigelow. If you would like a copy of the consumer report, please check the box below and C.O. Bigelow will request that the consumer reporting agency send a copy of the consumer report to you at no charge to the address provided below.

I would like a copy.

C. MINNESOTA ONLY

C.O. Bigelow, when considering your application for employment will obtain a consumer report from United Stores Mutual Association, Intellicorp or Secure Point. As an applicant for employment or employee of C.O. Bigelow, you are a "consumer" with rights under the Fair Credit Reporting Act and Minnesota Statute Section 13C.02.

You have the right to receive a copy of the consumer report that is obtained by C.O. Bigelow. If you would like a copy of the consumer report, please check the box below and C.O. Bigelow will request that the consumer reporting agency send a copy of the consumer report to you at no charge to the address provided below.

I would like a copy.

D. OKLAHOMA ONLY

C.O. Bigelow, when considering your application for employment will obtain a consumer report from United Stores Mutual Association, Intellicorp or Secure Point. As an applicant for employment or employee of C.O. Bigelow, you are a "consumer" with rights under the Fair Credit Reporting Act.

You have the right to receive a copy of the consumer report that is obtained by C.O. Bigelow. If you would like a copy of the consumer report, please check the box below and C.O. Bigelow will request that the consumer reporting agency send a copy of the consumer report to you at no charge to the address provided below.

I would like a copy.

ACKNOWLEDGED: _____
NAME (SIGNATURE) NAME (PRINTED)

DATE

IF YOU SEEK A COPY OF A REPORT, PLEASE FILL OUT ADDRESS, CITY, STATE AND ZIP:

STREET ADDRESS CITY ST ZIP

If applicant requests copy of Consumer Report, Manager should call 1-800-765-7465

REFERENCE FORM

Date: _____

Candidate's Name: _____ Phone: _____

If you are a former Limited Brands Associate, please verify the last four digits of your social security number: _____

Please list three business references:

- Two from a previous employer
- One from a peer (co-worker)

Supervisor 1

Name: _____

Relationship: _____

Company: _____

Position: _____

Address: _____

Work Phone: _____ Cell Phone: _____

Home Phone: _____ Length of time known? _____

Supervisor 2

Name: _____

Relationship: _____

Company: _____

Position: _____

Address: _____

Work Phone: _____ Cell Phone: _____

Home Phone: _____ Length of time known? _____

Peer

Name: _____

Relationship: _____

Company: _____

Position: _____

Address: _____

Work Phone: _____ Cell Phone: _____

Home Phone: _____ Length of time known? _____