

## Buckman's Ski and Snowboard Shops - Retail Job Application -

Thank you for your interest in working in one of our six Eastern PA retail locations! Seasonal Full Time and Seasonal Part Time positions are available (October 2011 – March 2012).

To submit your application, please fill out the following two pages and fax them to our corporate office. Be sure to indicate which store you are interested in working in.

Your application will be given to the appropriate store manager who will contact you in September if a position is available.

Please write clearly, and thanks for your interest in working at Buckmans this season!

Fax your completed application to: 610.495.7229

## Our Store Locations are:

**Buckman's Ski and Snowboard Shop** King of Prussia 740 DeKalb Pike King of Prussia, Pa 19406

Buckman's Ski and Snowboard Shop Doylestown 635 North Main Street Doylestown, Pa 18901

Buckman's Ski and Snowboard Shop Ardmore 26 W. Lancaster Avenue Ardmore, Pa 19003 Buckman's Ski and Snowboard Shop Montgomeryville 925 Bethlehem Pike (Route 309) Montgomeryville, Pa 18936

**Buckman's Ski and Snowboard Shop** Reading 301 E. Bellevue Ave. Reading, PA 19605

**Buckman's Ski and Snowboard Shop** Whitehall (former Nestor's Sporting Goods location) 2510 MacArthur Road Whitehall, PA 18052

## APPLICATION FOR EMPLOYMENT

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

| PERSONAL INFORM  | MATION  |                             |                    |                    |                           | 7           |
|--|---|-----------------------------|--------------------|--------------------|---------------------------|-------------|
|  |   |                             |                    | <u> </u>           | DATE                      | LAST        |
|  |   |                             |                    |                    | SOCIAL SECURITY           | TS          |
| NAME   | LAST  | FIRST                       |                    | MIDDLE             | NUMBER                    | + $+$       |
| DDECENT ADDDECC  |   |                             |                    |                    |                           |             |
| PRESENT ADDRESS  | STREET  | CITY                        |                    | STATE              | ZIP                       | +           |
| PERMANENT ADDRESS  | 3   |                             |                    |                    |                           |             |
| T EKWANENT ADDRESS   | STREET  | CITY                        |                    | STATE :            | ZIP                       | <b>1</b> ├─ |
| PHONE NO.  | AR  | E YOU 18 YEARS OR           | OLDER?             | Yes □              | No □                      |             |
| ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOIN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATE |   | .OYED                       |                    | No □               |                           |             |
| EMPLOYMENT DES   | IDED  |                             |                    |                    |                           | ╡           |
| EMPLOTMENT DES   | IKED  |                             | DATE YOU           | ,                  | SALARY                    |             |
| POSITION   |   |                             | CAN START          |                    | DESIRED                   | ᆜ끪          |
| ARE YOU EMPLOYED N   | IF SO MAY WE INQUIRE RE YOU EMPLOYED NOW? OF YOUR PRESENT EMPLOYER? |                             |                    |                    |                           | FIRST       |
| ARE TOO LIVIP LOTED IN   | Ovv:  |                             | OF TOOK FIX        | LOCIVI LIVIFLY     | JILIN!                    | 1           |
| EVER APPLIED TO THIS COMPANY BEFORE? WHERE?  |   |                             |                    | ,                  | WHEN?                     | 4           |
| REFERRED BY  |   |                             |                    |                    |                           |             |
| EDUCATION  | NAME AND LO   |                             | *NO OF             | *DID YOU           |                           |             |
| EDUCATION  | NAME AND LC   | OCATION OF SCHOOL           | YEARS<br>ATTENDED  | GRADUATE?          | SUBJECTS STUDIED          | ┧┝          |
| GRAMMAR SCHOOL   |   |                             |                    |                    |                           |             |
| HIGH SCHOOL  |   |                             |                    |                    |                           | MIDDLE      |
| COLLEGE  |   |                             |                    |                    |                           |             |
| TRADE, BUSINESS OR<br>CORRESPONDENCE<br>SCHOOL   |   |                             |                    |                    |                           |             |
| GENERAL  |   |                             |                    |                    |                           |             |
| SUBJECTS OF SPECIAL  | STUDY OR RE   | SEARCH WORK                 |                    |                    |                           |             |
|  |   |                             |                    |                    |                           |             |
| SPECIAL SKILLS   |   |                             |                    |                    |                           |             |
| ACTIVITIES: (CIVIC ATHLE   | TIC ETC.)   |                             |                    |                    |                           |             |
| EXCLUDE ORGANIZATIONS, THE NA  |   | ES THE RACE, CREED. SEX. AG | GE, MARITAL STATUS | S, COLOR OR NATION | OF ORIGIN OF ITS MEMBERS. |             |
| U. S MILITARY OR   | PRESENT MEMBERSHIP IN   |                             |                    |                    |                           |             |
| NAVAL SERVICE  | RANK NATIONAL GUARD OR RESERVES                                     |                             |                    |                    |                           |             |

\*This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and interpretive guidance promulgated by the EEOC on July 26. 1991.

| FORMER EMPLOY   | YERS (LIST BEL  | OW LAST THREE EMPLO  | OYERS, START   | ING WITH LAS  | ST ONE FIRST).         |  |
|---|---|--|--|---|------------------------|--|
| DATE<br>MONTH AND YEAR  | NAME AND ADDRESS OF EMPLOYER  |  | SALARY   | POSITION  | REASON FOR LEAVING     |  |
| FROM  |   |  | +  |   |                        |  |
| TO  | 1   |  |  |   |                        |  |
| FROM  |   |  |  |   |                        |  |
| TO  | 1   |  |  |   |                        |  |
| FROM  |   |  |  |   |                        |  |
| TO  | 1   |  |  |   |                        |  |
| FROM  |   |  |  |   |                        |  |
| ТО  | ]   |  |  |   |                        |  |
| WHICH OF THESE JOBS   | DID YOU LIKE BES  | Γ?   |  |   |                        |  |
| WHAT DID YOU LIKE MOS   | ST ABOUT THIS JOE   | 3?   |  |   |                        |  |
| REFERENCES: GIV   | /E THE NAMES OF T   | HREE PERSONS NOT RELATE  | D TO YOU, WHOM   | // YOU HAVE KNO   | WN AT LEAST ONE YEAR.  |  |
| NAME  |   | ADDRESS  | В  | USINESS   | YEARS<br>ACQUAINTED    |  |
| 1   |   |  |  |   |                        |  |
| 2   |   |  |  |   |                        |  |
| 3   |   |  |  |   |                        |  |
| BE SUBJECT TO   | O CRIMINAL PENAL  | NT OR CONTINUED EMPLO<br>FIES AND CIVIL LIABILITY.   | gnature of Applica   |   | IOLATES THIS LAW SHALL |  |
| EMERGENCY NOTIF   | Y<br>NAME   | ADDRESS PHONE NO.  |  |   |                        |  |
| IF ANY FALSE INFORI<br>AM EMPLOYED. MY E<br>IN CONSIDERATION O<br>MY EMPLOYMENT AN<br>TIME, AT EITHER MY<br>EMPLOYMENT MAY B<br>UNDERSTAND THAT I<br>BY THE PRESIDENT, I<br>OR TO MAKE ANY AG | MATION, OMISSIONS MPLOYMENT MAY E OF MY EMPLOYMEN ID COMPENSATION OR THE COMPANY'S E CHANGED, WITH NO COMPANY REPE HAS ANY AUTHORIT | S, OR MISREPRESENTATIONS BE TERMINATED AT ANY TIME. T, I AGREE TO CONFORM TO | ARE DISCOVERE THE COMPANY'S R WITHOUT CAU ID AND AGREE TI TH OR WITHOUT I 'S PRESIDENT, AI | D, MY APPLICATION RULES AND REGUESE. AND WITH OR HAT THE TERMS AND THE AND THEN ONLY WENTER ONLY WE | AND CONDITIONS OF MY   |  |
| DATE  | SIGNATURE   |  |  |   |                        |  |
|   |   | DO NOT WRITE BELC  | W THIS LINE  |   |                        |  |
| INTERVIEWED BY:   |   |  |  | DAT   | E:                     |  |
| REMARKS:  |   |  |  |   |                        |  |
|   |   |  |  |   |                        |  |
| <u>NEATNESS</u>   |   |  | BILITY   |   |                        |  |
| HIRED: Yes No   | 0   | POSITION   |  | DEF   | PT.                    |  |
| SALARY/WAGE   |   |  | ATE REPORTING  |   |                        |  |
| APPROVED:   | 1.  | GER DI   | PT HEAD  | 3   | GENERAL MANAGER        |  |

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. This Application for Employment Form is sold for general use throughout the United States. TOPS assumes no responsibility for the inclusion in said form of any questions which, when asked by the Employer of the Job Applicant, may violate State and/or Federal Law.