

# GWK ENTERPRISES, INC.

Parent Company of Four Seasons, Four Seasons Outlet and Pegasus Fine Gifts

## APPLICATION FOR EMPLOYMENT

NAME \_\_\_\_\_

LAST NAME

MI

FIRST NAME

POSITION APPLYING FOR \_\_\_\_\_

DATE \_\_\_\_\_

STORE LOCATION: \_\_\_\_\_



[www.fourseasonsdirect.com](http://www.fourseasonsdirect.com)

Geneseo, IL

• Peoria, IL

• Princeton, IL

Cedar Rapids, IA

• Davenport, IA

• Iowa City, IA

As an equal opportunity employer, GWK Enterprises, Inc. does not discriminate in hiring or terms and conditions of employment because of an individual's race, color, religion, gender, sexual orientation, national origin, age, disability or any other legally protected class.

## HOW DID YOU LEARN ABOUT FOUR SEASONS?

<input type="checkbox"/> Newspaper	<input type="checkbox"/> Friend	<input type="checkbox"/> Internet	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Relative	<input type="checkbox"/> GWK Employee: _____		<input type="checkbox"/> Other _____

## CONTACT INFORMATION (PLEASE PRINT)

Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Home Telephone #		Cell Phone #	
E-Mail Address		Best time to reach you	

## APPLICATION INFORMATION

Yes No

If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you ever filed an application with Four Seasons before? If Yes, give date _____	<input type="checkbox"/>	<input type="checkbox"/>	
Have you ever been employed with Four Seasons before? If Yes, give date(s) from _____ to _____	<input type="checkbox"/>	<input type="checkbox"/>	
Do you have any relatives/acquaintances employed at Four Seasons? If Yes, give name(s) and relationship(s) _____	<input type="checkbox"/>	<input type="checkbox"/>	
May we contact your current employer?	<input type="checkbox"/>	<input type="checkbox"/>	
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>(Proof of citizenship or immigration status will be required upon employment.)</i>	<input type="checkbox"/>	<input type="checkbox"/>	
On what date would you be available for work? Date available _____			
Are you available to work:	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<input type="checkbox"/> Temporary
Can you travel if a job requires it?	<input type="checkbox"/>	<input type="checkbox"/>	
Have you been convicted of a felony within the last seven (7) years? <i>(Conviction will not necessarily disqualify an applicant from employment.)</i> If Yes, please explain: _____	<input type="checkbox"/>	<input type="checkbox"/>	

**EDUCATION**

NAME OF SCHOOL	GRADUATED	COURSES TAKEN OR DEGREE	YEARS COMPLETED
High School			
College			
Graduate School			
Major	Minor		
Languages Spoken Fluently			

**EMPLOYMENT EXPERIENCE**

List your previous work experience beginning with your current or most recent position. Use additional sheet if necessary. You may include as part of your employment history any verified work performed on a volunteer basis.

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Your Job Title	Supervisor's Name & Title			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Your Job Title	Supervisor's Name & Title			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Your Job Title	Supervisor's Name & Title			
Reason for Leaving				

Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)		Hourly Rate/Salary		
		Starting	Final	
Your Job Title	Supervisor's Name & Title			
Reason for Leaving				

## SPECIAL SKILLS & QUALIFICATIONS

Summarize special job-related skills that you believe would be relevant to the position for which you are applying.

## COMPUTER SKILLS

Summarize any software packages in which you are proficient.

## REFERENCES

Please list three business associates who you have reported to or worked with.

NAME	RELATIONSHIP & NUMBER OF YEARS ACQUAINTED	PHONE NUMBER

## APPLICANT'S STATEMENT

I certify that the information provided on this application (and any resume submitted) is true and complete to the best of my knowledge.

In the event of employment, I understand that false or misleading statements or omission of information given in my application or interview(s) may disqualify me from further consideration for employment and may result in termination if discovered at a later date. I also agree, in the event of employment, to abide by the practices and procedures of GWK Enterprises, Inc.

I further understand that employment with GWK Enterprises, Inc. is voluntarily entered into "at will", and that I am free to resign at any time. Similarly, GWK Enterprises, Inc. is free to terminate my "at will" employment at any time, with or without cause, and with or without notice.

I authorize GWK Enterprises, Inc. to investigate all information pertinent to my application to determine my qualifications for employment. I authorize all persons and organizations having information relevant to my application to provide that information to GWK Enterprises, Inc. and, subject to any applicable restrictions on the provision or use of such information contained in applicable employment related laws, I will hold harmless GWK Enterprises, Inc., its employees and agents, and all those providing information to it from any liability rising out of or as a result of the use of this information.

In processing my application, GWK Enterprises, Inc. may request my permission, by means of a separate document, to obtain an investigative consumer report, which may include information as to my character, general reputation or criminal record. I also agree to sign consent forms necessary to conduct lawful pre-employment and employment checks.

This application is current for only 90 days. At the conclusion of this time, if I have not heard from GWK Enterprises, Inc. and still want to be considered for employment, it will be necessary for me to complete a new application.

I hereby acknowledge that I have read, understand and consent to the above statements.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE