

KRINGLE EMPORIUM® LLC

Application For Employment

KRINGLE EMPORIUM® LLC IS AN EQUAL OPPORTUNITY EMPLOYER, AND WILL CONSIDER ALL APPLICANTS WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, SEX, DISABILITY, SEXUAL ORIENTATION, AGE, OR ANY OTHER STATUS PROTECTED BY APPLICABLE FEDERAL, STATE, OR LOCAL LAW.

INSTRUCTIONS:

PLEASE ANSWER ALL QUESTIONS ACCURATELY, COMPLETELY AND LEGIBLY. USE "N/A" IN ANY SPACE THAT DOES NOT APPLY TO YOU. INCOMPLETE APPLICATIONS OR APPLICATIONS PROVIDING UNREQUESTED INFORMATION MAY BE CONSIDERED WITHDRAWN.

PERSONAL INFORMATION

Position applied for: _____ Salary Desired: _____

Last Name: _____ First Name: _____ MI: _____

Current Address: _____ City: _____

State: _____ Zip Code: _____ How long have you lived there? _____

Primary Phone: (____) _____ — _____ Secondary Phone: (____) _____ — _____

Are you 18 years of age or older? Yes No

Do you have unrestricted legal authorization to work in the United States? Yes No

By law, proof of work authorization will be required of all applicants within 72 hours of commencement of employment.

Can you perform the essential functions of the job with or without reasonable accommodation? Yes No

PERSONAL REFERENCES

Please list the names of three persons, not related to you, whom you have known for at least one year. Do not list relatives.

NAME	PHONE	OCCUPATION	YRS KNOWN

Release for contacting references: I hereby authorize Kringle Emporium® LLC to contact any of the above references. I further authorize such references to release any information concerning me as they deem appropriate. I release and forever discharge Kringle Emporium® LLC and its affiliated companies, successors, assigns, former or current shareholders, officers, directors, employees, agents, attorneys and representatives, and the above-named references, their agents and employees, from any and all liability, suits or causes of action arising in any manner from Kringle Emporium® LLC contacting such references. **I understand that this release prevents me from instituting any claim, lawsuit or other legal action based on any information any reference provides Kringle Emporium® LLC.**

Signature to accept release for contacting references as stated above: _____ Date: _____

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EMPLOYMENT STATUS

Are you currently employed? Yes No

Have you ever been discharged or requested to resign from a position? Yes No

If "yes", explain: _____

May we contact your present employer? Yes No

If "no", explain: _____

EMPLOYMENT HISTORY

List last six employers with the **most recent employer first**. You may include military service, temporary employment and any verified work performed on a volunteer basis. This section **MUST** be completed, even if attaching a resume. Failure to complete this Employment History in full or writing "see resume" or any other instruction will result in application being considered as withdrawn.

EMPLOYER NAME & ADDRESS	SUPERVISOR	PHONE	POSITION HELD	REASON FOR LEAVING	START/END DATES
_____ _____ _____					
_____ _____ _____					
_____ _____ _____					
_____ _____ _____					
_____ _____ _____					
_____ _____ _____					

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Professional licenses: Yes No

Do you have any special computer skills? _____

Do you have any technical skills and training? Yes No

List other job related skills relevant to the position sought: _____

Have you ever applied for a position with Kringle Emporium or other affiliated entities, Kringle Candle, Co or The Farm Table, LLC ? Yes No

If yes, when? _____

Have you been employed by any of our affiliated entities, Kringle Candle, Co or The Farm Table, LLC ?

If yes, when and what position? _____

Full Time Part Time Year Round Seasonal

Are you now, or have you previously been, employed by a candle making company?

If yes, which candle maker: _____ When? _____

In which job(s) were you employed? _____

Are you applying for:

If less than full time, total number of hours available per week: _____

Please indicate hours, shifts, or days you **cannot** work: _____

When are you available to start working? _____

EDUCATION

LEVEL	NAME OF SCHOOL	CITY & STATE	# YRS COMPLETED	COURSE OF STUDY OR MAJOR	HONORS RECEIVED
HIGH SCHOOL					
TRADE/TECHNICAL SCHOOL					
COLLEGE					
GRAD SCHOOL					
PROFESSIONAL COURSES					

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AGREEMENT

The following section contains important information regarding your legal rights and contains important certifications and releases of liability. Please read it carefully before signing.

I understand that if I am offered employment with Kringle Emporium® LLC, prior to or at the time that I start work, I will be required to present original documents establishing my identity and my eligibility to work in the United States.

Upon termination, I authorize Kringle Emporium® LLC to provide information to my prospective employers regarding my employment history and performance and hereby release Kringle Emporium, LLC and any person employed by it or associated with it from all liability in connection with the provision of such information.

Unless applicable state or local law provides otherwise, I understand that, if hired, I shall be employed “at will” and that nothing contained in Kringle Emporium’s® application, personnel policies or other written documents, no any oral statements made to me by Kringle Emporium® LLC representatives in connection with my application for employment or at any other time, shall constitute an express or implied employment contract. Unless applicable state or local law provides otherwise, I understand and agree that, if hired, my employment is for no definite period and may be terminated at any time with or without notice or cause.

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

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified, omitted, or misrepresented statements on this application may constitute grounds for dismissal.

By signing below, I acknowledge that I have read, understood and voluntarily agree to the above.

Signature: _____ Date: _____