



Employment Application

Equal Opportunity Employer: Tapestry maintains and promotes a system-wide policy of non-discrimination on the basis of race, religion, color, sex, age, sexual orientation, national origin, disability, gender- identity, veteran status, or genetic information.

Name: _____ Pronouns: _____ Date: _____
(Please Print Clearly)

Address: _____
No. Street City State Zip Code

Telephone No.: () _____ Cell No.: () _____

Email: _____

Position and Availability

Position(s) Desired: _____ ☐ Full-time ☐ Part-time, specify days/hours: _____

Date Available: _____

How did you learn about this position?

- ☐ Online Job Posting (Site: _____) ☐ Social Media (Platform: _____) ☐ Tapestry Website
☐ Job Fair or Recruitment Event ☐ Community Partner or Organization ☐ College/University Job Board
☐ Current Employee (Name: _____) ☐ Friend or Family ☐ Used Our Services ☐ Other

Education and Training

High School

Name and location:

Course of Study: _____ Did you graduate? ☐ Yes ☐ No Degree/Certificate: _____

College or University

Name and location:

Course of Study: _____ Did you graduate? ☐ Yes ☐ No Degree/Certificate: _____

Graduate School

Name and location:

Course of Study: _____ Did you graduate? ☐ Yes ☐ No Degree/Certificate: _____

Other

Name and location:

Course of Study: _____ Did you graduate? ☐ Yes ☐ No Degree/Certificate: _____

Describe in detail other training or education which is pertinent, including licenses, certificates or special skills:

Additional Information

- Have you ever worked for or applied for a position at Tapestry? (If yes, explain below) ☐ Yes ☐ No
- Do you have any relatives (spouse, child, parent, sibling, grandparent, grandchild, in-law or step relation, or anyone living in the same household) currently working for Tapestry (If yes, list below) ☐ Yes ☐ No
- Are you able to perform the essential functions of the job for which you are applying, with or without accommodation? If no, explain below. ☐ Yes ☐ No
- Are you currently employed? ☐ Yes ☐ No
If so may we inquire of your present employer? ☐ Yes ☐ No
- Do you have a valid driver's license? ☐ Yes ☐ No

Issuing State: _____

Work History (List most recent employment first)

1	Employer's Name, Address: Telephone: Supervisor's Name: Employment Dates From: To: Job Title: Description of Duties: Reason for Leaving: May we check references: <input type="checkbox"/> Yes <input type="checkbox"/> No
2	Employer's Name, Address: Telephone: Supervisor's Name: Employment Dates From: To: Job Title: Description of Duties: Reason for Leaving: May we check references: <input type="checkbox"/> Yes <input type="checkbox"/> No
3	Employer's Name, Address: Telephone: Supervisor's Name: Employment Dates From: To: Job Title: Description of Duties: Reason for Leaving: May we check references: <input type="checkbox"/> Yes <input type="checkbox"/> No

References (Must provide 3 references (2 of which are professional) to be considered for employment.)

1	Name: Telephone: Email: Relationship to candidate:
2	Name: Telephone: Email: Relationship to candidate:
3	Name: Telephone: Email: Relationship to candidate:

Certification

I certify by my signature below that all information given on this application, resume, and any supplement material is correct and complete to the best of my knowledge. If any information is false or misleading, it may cause my employment rejection or discharge after employment.

I understand and agree to the following:

(a) I authorize the Agency to obtain information regarding me from former employers and to check my educational credentials and other employment-related activities. I agree to cooperate in such inquiries and release those parties supplying such information to the Agency from all liability or responsibility with respect to the information supplied.

(b) If offered a hired position, I can provide proof of my identity and employment eligibility, pursuant to the Immigration Reform and Control Act of 1986.

(c) If offered a hired position, I understand that I must successfully complete a criminal background check.

(d) I understand that any employment given to me will be on a three (3) month introductory basis and may be terminated at any time, by myself or the employer, without notice or liability.

(e) I understand that by signing below, I attest that all of the provided information above and in my resume is accurate.

(f) I understand that any provided information that the Agency finds to be inaccurate can be used to disqualify me from this position.

Applicant Signature

Date