

WILLIAMS-SONOMA, INC.

WILLIAMS-SONOMA

POTTERY BARN

pottery barn kids



west elm



GENERAL INFORMATION

Please print in ink and provide all requested information.

An Equal Opportunity Employer

Today's Date Name (Last, First, Middle)	Please check all that apply: <input type="checkbox"/> Full Time (30 – 40 hrs / week) <input type="checkbox"/> Part Time (20 – 29 hrs / week) <input type="checkbox"/> Casual (variable schedule) <input type="checkbox"/> Temporary (holiday or summer)	Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If you are under 18, you may be required to provide a work permit prior to working.</i> Are you at least 16 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Street Address	If hired, you will be required to provide proof of your eligibility to work in the United States.								
City, State, Zip Code	Please indicate the hours you are available to work, during both day and evening. Note that you will not necessarily be asked to work all the hours you are available. The information enables us to source employment opportunities according to your availability. (e.g., 9:30 am – 5:30 pm, 5:00 am – 10:00 pm)								
Telephone (preferred)	Telephone (alternate)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 14.28%;">MONDAY</td> <td style="border: 1px solid black; width: 14.28%;">TUESDAY</td> <td style="border: 1px solid black; width: 14.28%;">WEDNESDAY</td> <td style="border: 1px solid black; width: 14.28%;">THURSDAY</td> <td style="border: 1px solid black; width: 14.28%;">FRIDAY</td> <td style="border: 1px solid black; width: 14.28%;">SATURDAY</td> <td style="border: 1px solid black; width: 14.28%;">SUNDAY</td> </tr> </table>	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY			
Email Address		(It is your responsibility to notify your supervisor should your availability change.)							
Position Desired									
Employment Location Desired		Have you ever applied to or worked for Williams-Sonoma, Inc. or any of our brands? <i>If you have worked for our company before please state where, when, final position and reason for leaving.</i> <input type="checkbox"/> Yes _____ <input type="checkbox"/> No							
Preferred Salary or Hourly Rate	Date Available For Work								

WORK EXPERIENCE

List your previous work experience for the last seven years, beginning with your current position (or most recent position, if you are not currently employed). Do not leave any gaps in your employment history. If you need additional space, please attach additional pages.

Employer	Starting Position	Starting Salary or Hourly Rate
Address (Street, City, State, Zip Code)	Last Position	Final Salary or Hourly Rate
Supervisor's Name / Title	Dates of Employment	Start (Month/ Year): End (Month/ Year):
Telephone	Reason For Leaving	Duties

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May we contact your current employer? Yes No

If no, at what point may we contact him/her? _____

ADDITIONAL WORK HISTORY INFORMATION

Yes No Can you perform the duties of the job for which you are applying with or without reasonable accommodation? Please ask to see a job description.

If no, describe the functions of the job that cannot be performed. (We comply with the ADA and state law and consider reasonable accommodation measures that may be necessary to enable eligible applicants to perform essential functions.)

Yes No Have you ever been terminated or forced to resign from any employment? If yes, please explain.

Yes No Have you ever been disciplined for misconduct by a former employer? If yes, please explain.

EDUCATION

Please print name, city, and state for each school

Degree, Type of course/major

High School		
College		
Additional Education		
Additional Training		

Computer Skills

Microsoft Office Powerpoint Access Publisher Project

Other Software:

Other Skills — Please list any additional job skills that you believe would be relevant to the position for which you are applying. Please also list those foreign languages in which you are proficient and describe the level of proficiency.

PROFESSIONAL REFERENCES

Name of Reference (not a relative)		Name of Reference (not a relative)	
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Telephone	Job Title	Telephone	Job Title
What is the relationship and how long have you known reference?		What is the relationship and how long have you known reference?	

APPLICANT'S STATEMENT

If I become employed, I agree to abide by the rules and regulations of Williams-Sonoma, Inc. If hired, I understand that I will be required to provide proof of my eligibility to work in the United States. I understand that my employment is at will. This means that I do not have a contract of employment for any particular duration or that limits the grounds for my termination in any way. I am free to resign at any time. Similarly, Williams-Sonoma, Inc. is free to terminate my employment at any time for any or no reason. I understand that while personnel policies, programs and procedures may exist and can be changed from time to time, my at- will status could be changed only if I were to enter into an express written contract with Williams-Sonoma, Inc. explicitly promising me job security, containing the words, "This is an

express contract of employment" and signed by an officer of Williams-Sonoma, Inc. The above language contains our entire agreement about my at-will status, and there are no oral or side agreements of any kind. All of the information I have supplied in this application is a true and complete statement of the facts and, if employed, I agree that any false statement, misrepresentation or omission may result in my immediate dismissal. I further authorize Williams-Sonoma, Inc. to contact all of my previous employers, educational institutions and references for full information regarding my employment history and for other information pertinent to my application.

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, GENDER IDENTITY, GENDER EXPRESSION, SEXUAL ORIENTATION, ANCESTRY, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Signature _____

Date _____