



DOLLAR TREE®

500 Volvo Parkway
Chesapeake, VA 23320

• USE BLACK INK PLEASE •

APPLICATION FOR EMPLOYMENT

P E R S O N A L	LAST NAME	FIRST	MIDDLE	DATE			
	STREET ADDRESS			CITY	STATE	ZIP	SOCIAL SECURITY NUMBER (Last Four Only) X X X - X X -
	POSITION DESIRED?				HOME PHONE		
	HAVE YOU APPLIED FOR EMPLOYMENT WITH US PREVIOUSLY? <input type="checkbox"/> YES <input type="checkbox"/> NO -- IF YES...				BUSINESS PHONE		
	MONTH & YEAR: LOCATION:				EXPECTED RATE OF PAY		
	JOB REQUIREMENTS BRIEF: ABLE TO UNLOAD STOCK FROM TRUCKS (MAX. 50 LBS.) STOCKING, PRICING, REGISTER OPERATION, ASSISTING CUSTOMERS AND GENERAL MAINTENANCE OF STORE.						
	AFTER READING THE ABOVE JOB REQUIREMENTS, ARE YOU ABLE TO PERFORM ALL DUTIES INDICATED WITH OR WITHOUT REASONABLE ACCOMMODATION? <input type="checkbox"/> YES <input type="checkbox"/> NO						
	WHAT PROMPTED YOU TO SELECT DOLLAR TREE AS A POTENTIAL EMPLOYER?						
	ARE YOU AVAILABLE FOR FULL TIME WORK? <input type="checkbox"/> YES <input type="checkbox"/> NO WHAT DAYS AND HOURS ARE YOU NOT AVAILABLE FOR WORK:				WILL YOU WORK OVERTIME IF NEEDED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
	DO YOU HAVE RELATIVES OR FRIENDS WORKING FOR DOLLAR TREE STORES? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, GIVE NAME, LOCATION & RELATIONSHIP:				WHEN WILL YOU BE AVAILABLE TO BEGIN WORK?		
SPECIAL TRAINING OR SKILLS (LANGUAGES, MACHINE OPERATION, ETC.)				ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE U.S.? <input type="checkbox"/> YES <input type="checkbox"/> NO <small>* (PROOF OF ELIGIBILITY IS REQUIRED UPON EMPLOYMENT)</small>			
ARE YOU 18 YEARS OF AGE OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO SUBJECT TO VERIFICATION OF MINIMUM LEGAL AGE REQUIREMENTS				IF YOU SERVED IN THE MILITARY, WERE YOU HONORABLY DISCHARGED? <input type="checkbox"/> YES <input type="checkbox"/> NO			

E D U C A T I O N	(CIRCLE LAST YEAR COMPLETED)						
	HIGH SCHOOL	1	2	3	4	GRADUATED? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?
	COLLEGE	1	2	3	4	GRADUATED? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?
LIST SPECIAL INTERESTS AND HOBBIES:							

E M P L O Y M E N T D A T A	FOR OFFICE USE ONLY					Location # _____	WOTC Conf # _____
	DATE HIRED	STARTING DATE	RATE OF PAY	FULL-TIME <input type="checkbox"/>	POSITION	REHIRE: YES <input type="checkbox"/>	
				PART-TIME <input type="checkbox"/>		NO <input type="checkbox"/>	
	IN CASE OF EMERGENCY CONTACT						
	NAME	RELATIONSHIP	PHONE #	OCCUPATION	ADDRESS		

EMPLOYMENT HISTORY

(SHADED AREAS FOR COMPANY USE ONLY)

PLEASE GIVE ACCURATE, COMPLETE
FULL-TIME AND PART-TIME EMPLOYMENT
RECORD. START WITH PRESENT OR
MOST RECENT EMPLOYER.

COMPANY NAME:	TELEPHONE: ()
ADDRESS:	EMPLOYED (MO. & YR.) FROM: TO:
NAME OF SUPERVISOR:	RATE OF PAY START: LAST:
STATE JOB TITLE AND DESCRIBE YOUR WORK:	REASON FOR LEAVING:
VERIFIED <input type="checkbox"/> COMMENTS:	

COMPANY NAME:	TELEPHONE: ()
ADDRESS:	EMPLOYED (MO. & YR.) FROM: TO:
NAME OF SUPERVISOR:	RATE OF PAY START: LAST:
STATE JOB TITLE AND DESCRIBE YOUR WORK:	REASON FOR LEAVING:
VERIFIED <input type="checkbox"/> COMMENTS:	

COMPANY NAME:	TELEPHONE: ()
ADDRESS:	EMPLOYED (MO. & YR.) FROM: TO:
NAME OF SUPERVISOR:	RATE OF PAY START: LAST:
STATE JOB TITLE AND DESCRIBE YOUR WORK:	REASON FOR LEAVING:
VERIFIED <input type="checkbox"/> COMMENTS:	

CERTIFICATION – PLEASE READ, SIGN AND DATE

All applicants for employment are judged solely on the basis of qualification and ability without regard to age, sex, race, national origin, religion, sexual orientation, marital status, disability, veteran status or other classification protected by law.

I acknowledge that the Company follows an employment – at – will policy, such that I or the Company may terminate my employment at any time for any reason. I understand that this application is not a contract of employment. I understand that to be employed, I must be lawfully authorized to work in the United States and show the Company documentation that will prove this.

I understand and agree that my previous employers may be contacted. I fully consent to and understand that Dollar Tree Stores may request information from public and private sources about any of the information noted in this application.

I hereby authorize, without reservation, any financial institution, credit agency, information service bureau, school, employer or insurance company contacted by Dollar Tree Stores to furnish the information described herein at any time during the application process and/or during any employment. I release them from all liability for doing so.

I certify that all the statements herein are true and accurate and understand that any falsification or omission shall result in dismissal.

Your Signature: _____ Date: _____