



ANCHOR BLUE
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Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Miller's Outpost are Equal Opportunity Employers. All persons shall have the opportunity to be considered for employment without regard to their race, color, religion, national origin, ancestry, lineage or citizenship status, age, disability or handicap, perceived disability or handicap, sex, marital status, veteran status, sexual orientation, arrest or court record, or any other characteristic protected by applicable federal, state, or local laws.

Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Miller's Outpost will endeavor to make reasonable accommodation to the known physical or mental limitations of a qualified applicant or employee with a disability unless the accommodation would impose an undue hardship on the operation of our business. If you require such assistance to complete this form, to participate in an interview, or to perform your job, please let us know. If you need an accommodation, please specify those essential functions for which you would need an accommodation in order to perform and the nature of the required accommodation.

GENERAL INFORMATION															
LOCATION/STORE #: _____ TODAY'S DATE: _____ NAME (LAST) (FIRST) (M.I.) _____ SOCIAL SECURITY NUMBER _____ STREET ADDRESS _____ CITY STATE ZIP _____ TELEPHONE (HOME) (WORK) _____ EMAIL ADDRESS _____ Have you previously been employed by this company ? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, when? _____	PAY DESIRED: _____ DATE AVAILABLE FOR WORK: _____ POSITION(S) APPLYING FOR: _____ FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SEASONAL <input type="checkbox"/> PLEASE INDICATE THE HOURS YOU ARE AVAILABLE TO WORK DURING BOTH THE DAY AND THE EVENING. IT IS NOT NECESSARY FOR YOU TO IDENTIFY UNAVAILABILITY FOR WORK BECAUSE OF RELIGIOUS OBSERVANCE OR PRACTICE. SUBSEQUENT TO ANY JOB OFFER, WE WILL CONSIDER WHETHER A REASONABLE ACCOMMODATION CAN BE MADE. <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 14.28%;">Sunday</td> <td style="width: 14.28%;">Monday</td> <td style="width: 14.28%;">Tuesday</td> <td style="width: 14.28%;">Wednesday</td> <td style="width: 14.28%;">Thursday</td> <td style="width: 14.28%;">Friday</td> <td style="width: 14.28%;">Saturday</td> </tr> <tr> <td style="height: 20px;"> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> NOTE: IF YOUR AVAILABILITY CHANGES, IT IS YOUR RESPONSIBILITY TO NOTIFY YOUR SUPERVISOR IF YOU ARE UNDER 18 YEARS OF AGE, DO YOU HAVE THE REQUIRED WORK PERMITS? YES <input type="checkbox"/> NO <input type="checkbox"/> (You will be required to produce the permits before starting work.) ARE YOU RELATED TO ANYONE EMPLOYED BY THE COMPANY? YES <input type="checkbox"/> NO <input type="checkbox"/> IF YES, IDENTIFY BY NAME(S), POSITION, AND LOCATION.	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday							
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday									

PREVIOUS EMPLOYMENT - PLEASE PRINT AND LIST ALL PRIOR EMPLOYERS, IN CHRONOLOGICAL ORDER, BEGINNING WITH YOUR PRESENT OR MOST RECENT EMPLOYER, PLEASE ATTACH ADDITIONAL SHEETS TO THIS APPLICATION IF NECESSARY. COMPLETE ALL REQUESTED INFORMATION IN FULL. DO NOT INCLUDE OVERTIME, BONUS, COMMISSIONS, ETC., IN THE SALARY INFORMATION. PLEASE INCLUDE AS PART OF YOUR EMPLOYMENT HISTORY ANY VERIFIED WORK PERFORMED ON A VOLUNTEER BASIS AND/OR WORK PERFORMED WHILE IN THE MILITARY.

WORK EXPERIENCE			
EMPLOYMENT DATES (MO/YR)	NAME AND ADDRESS OF PREVIOUS EMPLOYER	EMPLOYMENT INFORMATION	REASON FOR LEAVING
From:		Job Title:	
To:		Supervisor's Name:	<i>Beginning Salary:</i>
		Phone Number:	<i>Ending Salary:</i>
From:		Job Title:	
To:		Supervisor's Name:	<i>Beginning Salary:</i>
		Phone Number:	<i>Ending Salary:</i>
From:		Job Title:	
To:		Supervisor's Name:	<i>Beginning Salary:</i>
		Phone Number:	<i>Ending Salary:</i>
From:		Job Title:	
To:		Supervisor's Name:	<i>Beginning Salary:</i>
		Phone Number:	<i>Ending Salary:</i>

Is there any reason that we should not contact any employer for a reference? ___YES ___ NO If yes, please identify the employer and explain why not.

EDUCATION AND TRAINING

SCHOOL	PRINT NAME, CITY, STATE, FOR EACH SCHOOL	# OF YEARS ATTENDED	DEGREE	MAJOR/COURSES
HIGH SCHOOL				
COLLEGE				
OTHER				

In the space below, please indicate skills, experience, or qualifications that will aid you in the position(s) you are seeking.

ADDITIONAL EMPLOYMENT INQUIRIES

DO YOU HAVE ADEQUATE PUBLIC OR PRIVATE TRANSPORTATION TO GET TO WORK? YES NO

PURSUANT TO THE IMMIGRATION REFORM AND CONTROL ACT OF 1986, ALL APPLICANTS WHO ARE OFFERED EMPLOYMENT MUST PRODUCE DOCUMENTS ESTABLISHING THEIR IDENTITY AND AUTHORIZATION FOR EMPLOYMENT IN THE UNITED STATES. THESE DOCUMENTS MUST BE PRODUCED NO LATER THAN SEVENTY-TWO (72) HOURS AFTER EMPLOYMENT COMMENCES. IN ADDITION, ALL NEW HIRES WILL BE REQUIRED TO VERIFY THEIR EMPLOYMENT AUTHORIZATION UNDER OATH BY SIGNING INS FORM I-9.

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE PAST SEVEN (7) YEARS THAT HAS NOT BEEN EXPUNGED, SEALED, PARDONED, DISCHARGED, ERADICATED, OR IMPOUNDED.

YES NO IF YES, WHEN?

*California applicants only: Please exclude all marijuana or marijuana-related convictions that did not occur in the last two years.

*Georgia applicants only: Please exclude any convictions under the Georgia First Offender Act.

A FELONY CONVICTION WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT. TO HELP US EVALUATE YOUR APPLICATION, PLEASE DESCRIBE THE NATURE OF THE OFFENSE FOR WHICH YOU WERE CONVICTED, THE CIRCUMSTANCES SURROUNDING THE COMMISSION OF THE OFFENSE, AND YOUR SUBSEQUENT REHABILITATION.

BUSINESS REFERENCES (Please list business or work-related references and their relationship to you. Please exclude relatives.)

	Name	Business Relationship	Telephone Number
1.			
2.			
3.			

APPLICANT'S STATEMENT

I have read and fully understand the questions asked in this application. I certify that all answers given by me are true, accurate, and complete. I also understand that the omission and/or misrepresentation of any fact from this application or during any interview for employment (regardless of when it is discovered) will be cause for immediate dismissal. I authorize Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost to contact all of my employment references, and to inquire about, investigate, and obtain copies of any records which relate to me from my former employers and educational institutions I have attended. I hereby release Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost and all affiliated entities, as well as any person or institution that provides Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost, with any information about me, from any and all liability whatsoever resulting from any such inquiry, investigation, or communication.

If hired, I agree to abide by all of the rules and regulations of Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost. I understand and agree that nothing in this application shall constitute a contract or guarantee of employment for a specific period of time. I also understand that if employed, my employment may be terminated with or without cause and with or without notice at any time, at the election of Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost or me. I further understand that no representative or agent of Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost has the authority to enter into any agreement for employment for any specific period of time, or to make an agreement contrary to the foregoing unless the agreement is in writing and is signed by the President or CEO of Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost. In addition I understand that Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance, or otherwise change all policies, procedures, benefits, or other terms and conditions of employment. I understand that any hiring decision is contingent upon my successful completion of all Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost lawful pre-employment checks, which may include a job-related physical examination or drug/alcohol test. Further, I understand that, if hired, I may be subject to additional lawful checks to maintain my eligibility for continued employment. I agree to execute any consent forms necessary for Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost to conduct its lawful employment checks. I also understand that, in connection with the routine processing of my employment application, Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost may use a consumer reporting agency to conduct a background check. I hereby give my consent and understand that Hub Distributing Inc., Anchor Blue, Levi's/Dockers Outlet by M.O.S.T. and Millers Outpost will provide me with the appropriate disclosure prior to requesting a background investigation by a consumer reporting agency.

I also understand that this application will be kept active for a period of 60 days. Thereafter, I will be required to complete a new application in order to be considered for employment.

Date

Signature of Applicant



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**HUB DISTRIBUTING INC.
EMPLOYMENT SCREENING INQUIRY
NON-CALIFORNIA**

APPLICANT (PLEASE PRINT)

NAME (FIRST) _____ (MIDDLE) _____ (LAST) _____

OTHER NAME(S) USED MAIDEN, NAME CHANGES, ETC. _____

PRESENT ADDRESS _____

CITY _____ STATE _____ ZIP _____ TELEPHONE _____

PREVIOUS ADDRESS _____

CITY _____ STATE _____ ZIP _____ TELEPHONE _____

SOCIAL SECURITY NUMBER _____

BIRTH DATE: MONTH _____ DAY _____

APPLICANT READ CAREFULLY AND SIGN

AUTHORIZATION TO PROCURE A CONSUMER REPORT

In processing my application for employment, Hub Distributing Inc. may procure a consumer report on me. I understand that information provided to Hub Distributing Inc. in connection with my employment may be communicated among its corporate affiliates. I further understand that if I do not wish such information to be communicated to such affiliates, I will notify Hub Distributing Inc. in writing.

Based on the foregoing, I hereby authorize Hub Distributing Inc. to procure a consumer report on me. If I am granted employment, Hub Distributing Inc. and/or companies affiliated with it may subsequently, from time to time, request consumer reports in connection with my employment.

(Applicant / Employee's Signature)

Date