

BRADLEY T. CHAMBERS, INC. (D/B/A Millie's on Main) APPLICATION FOR EMPLOYMENT

Please print in ink. Application must be FULLY completed even if resume is attached.

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DATE:				
otherwise qualified a and conditions relate	applicants on tood to pregnancy der status, ger	equal opportunity employ the basis of race, color, re y), weight, height, nationa netic information, marital	ligion, age, se l origin, citize	x (including pregnancy nship, disability, sexual
	w application. Ca	for a period of six months. Coandidates for employment will o		
POSITION SOUGHT:_	Diago	ha anasifia		
	Ticasc	oc specific		
[]YES []NO	ons concerning th	The position identified above with the essential functions of the position.		
Referred by: [] Advertise	ement [] Employ	yment [] Friend/Relative/Emp	oloyee [] Job B	oard/Website [] Walk in
AVAILABILITY:				
When would you be avai (seasonal), indicate the la	lable to begin wor ast date you are av	rk? vailable for work:	If the posi	tion you seek is temporary
PERSONAL				
Name:				
Last		First	M	iddle
Address:				
riddress.	Street	City	State	Zip Code
Phone Numbers/e-mail:				
	Home	Work	Cell	E-mail
Are you over the age of 1	.8? YES [] NO	[] (If no, you may be require	d to provide author	orization to work)
		the United States? YES [] NO)[]	
felony charges against yo	ou? YES [] NO [y or misdemeanor? YES [] NO [] If you answered yes to either in the denial of employment).		

EDUCATION

	Name and Location of School	Course of Study	No. of Years Completed	Diploma or Degree Received
High School or GED				
College/University				
Graduate Work				
Vocational or Trade School				
Other				
(Please explain)				
SPECIAL SKILLS AN	D QUALIFICATIONS			1
Data Entry		Word		
		Processing		
Other Software Skills		Other Software Skills		
Summarize any special you seek.	skills and qualifications that you	n may posses that you for	eel may be job-relat	red for the position
you seek. Do you belong to any pryES[] NO[] If yes.	rofessional, trade, business or ci, please explain and list any officilities or other statuses protected	vic organization which ces held. (Omit any org	may be relevant to	the position you seek
Do you belong to any pryES[] NO[] If yes, religion, age, sex, disab	rofessional, trade, business or ci	vic organization which ces held. (Omit any org by law)	may be relevant to	the position you seek
Do you belong to any pryES[] NO[] If yes, religion, age, sex, disab	rofessional, trade, business or ci please explain and list any officilities or other statuses protected	vic organization which ces held. (Omit any org by law)	may be relevant to ganization which ref	the position you seek'flects your race, color
Do you belong to any pryES[] NO[] If yes religion, age, sex, disability of the prior of the prio	rofessional, trade, business or ci please explain and list any officilities or other statuses protected NOR EMPLOYMENT WITH	vic organization which ces held. (Omit any organization which ces held.) H MILLIE'S S[] NO[] If YI	may be relevant to ganization which ref	the position you seek'flects your race, color
Do you belong to any pryES[] NO[] If yes, religion, age, sex, disable PRIOR APPLICATIO Have you applied for a when Have you worked for	rofessional, trade, business or ciplease explain and list any officilities or other statuses protected in the complex of the c	vic organization which ces held. (Omit any organization which is sheld.) H MILLIE'S S [] NO [] If YINO [] If YINO [] If YES, iden	may be relevant to ganization which ref	the position you seek'flects your race, color
Do you belong to any pryES[] NO[] If yes, religion, age, sex, disable PRIOR APPLICATIO Have you applied for a when Have you worked for	rofessional, trade, business or ci please explain and list any officilities or other statuses protected NOR EMPLOYMENT WITH pipb with Millie's before? YES Millie's before? YES [] N	vic organization which ces held. (Omit any organization which is sheld.) H MILLIE'S S [] NO [] If YINO [] If YINO [] If YES, iden	may be relevant to ganization which ref	the position you seek'flects your race, color

May we contact your current employer? YES [] NO []

EMPLOYMENT (Start with your present or most recent position. Account for ALL time including periods of unemployment. Use additional pages if necessary to account for ALL time.)

Name of Employer:			Telephone Number:
Full Address: (Including Street, City, S	State & Zip)	Your Title:	Supervisor's Name and Title:
Date Employed " From" Month/Day/ Year	Date Employed " To" Month/Day/Year	Beginning Pay	Final Pay
Reason(s) for Leaving:	<u> </u>		
Describe the Work Performed:			
Name of Employer		Your Title:	Telephone Number:
		1041 11410.	
Full Address (Including Street, City, St	tate & Zip)		Supervisor's Name and Title:
Date Employed "From" Month/Day/Y	Year Date Employed "To" Month/Day/Year	Beginning Pa	y Final Pay
Reason(s) for Leaving:			
Describe the Work Performed:			
Name of Employer			Telephone Number:
Full Address (Including Street, City, St	tate & Zip)	Your Title:	Supervisor's Name and Title:
Day/Year M	ate Employed " To" onth/Day/Year	Beginning Pay	Final Pay
Reason(s) for Leaving:			
Describe the Work Performed:			
Name of Employer			Telephone Number:
Full Address (Including Street, City, St	tate & Zip)	Your Title:	Supervisor's Name and Title:
	ate Employed " To" conth/Day/Year	Beginning Pay	Final Pay
Describe the Work Performed:			
Name of Employer		Your Title:	Telephone Number:
Full Address (Including Street, City, St	tate & Zip)		Supervisor's Name and Title:
Date Employed "From" Month/Day/Y	Vear Date Employed "To" Month/Day/Year	Beginning Pa	y Final Pay
Reason(s) for Leaving:			

Describe the Work Performed:

Name of Employer			Telephone Number:
Full Address (Including Street, City	y, State & Zip)	Your Title:	Supervisor's Name and Title:
Date Employed "From" Month/ Day/Year	Date Employed " To" Month/Day/Year	Beginning Pay	Final Pay
Reason(s) for Leaving:			
Describe the Work Performed:			
Name of Employer			Telephone Number:
Full Address (Including Street, City	y, State & Zip)	Your Title:	Supervisor's Name and Title:
Date Employed "From" Month/ Day/Year	Date Employed " To" Month/Day/Year	Beginning Pay	Final Pay
Reason(s) for Leaving:			
Describe the Work Performed:			
PERSONAL AND PROFESSION	NAL REFERENCES		
Name:		Telepho	ne Number:
Employer:		Relation	nship
Name:		Telepho	ne Number:
Employer:		Relation	nship
Name:		Telepho	ne Number:
Employer:		Relation	nship

ACKNOWLEDGMENT AND AGREEMENT

I certify and attest that the answers given on my resume and employment application and during all interviews are true and complete to the best of my knowledge and that I have not knowingly withheld any facts or circumstances or provided misleading information. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I agree that falsification or omission of any such information or providing misleading information constitutes sufficient reason for denying me employment or for discharge from my employment.

In consideration of my employment, I agree to conform to the rules, policies and regulations of Millie's as they now exist or as they are hereafter modified. I further agree that my employment and compensation can be terminated, with or without cause, at any time, at the option of either Millie's or myself. All employment is at-will. I understand that no representative of Millie's other than its CEO has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, and any such agreement must then be in a writing entitled "Employment Agreement" and executed by the CEO to be enforceable.

I agree that, to the extent permitted by law, any action or suit against Millie's or its employees, owners or agents which arises out of my employment or termination of employment, including, but not limited to, claims arising under state or federal civil rights statutes, must be brought within 180 days of the event giving rise to the claim or be forever barred. This applies to the initial charge filed with the Equal Employment Opportunity Commission; provided that thereafter I am permitted to pursue litigation, if at all, as provided in the Commission's "Right to Sue" letter. I waive any longer, but not shorter, limitations periods to the contrary.

Under Michigan Law only, I understand that if I am unable to perform the duties outlined on the job description for the position I seek (or later hold) without an accommodation, I must notify Millie's of my special need in writing within 182 days of the time I know or should have known of my need.

I understand that, after receiving an offer of employment, Millie's may require, if it so chooses, the successful completion of physical or a drug test and/or a blood alcohol test as a condition of employment. By submitting this Application for Employment, I hereby consent to such tests, at Millie's' sole discretion and agree that testing positive for drugs/alcohol constitutes sufficient reason for withdrawing the offer of employment or terminating my employment and that any offer of employment may be withdrawn if the physical indicates that I am unable to perform the essential functions of my position with or without a reasonable accommodation.

I authorize Millie's to contact listed references, former employers, and any others who may have information concerning my application or qualification for employment. I also authorize a criminal background check. I release Millie's, its employees, owners and agents, and those who supplied Millie's with information from any liability or damages which may result from furnishing the requested information including my failure to be hired for the position for which I am applying. I agree that Millie's shall have the right to terminate my employment based on any criminal record I may have that it deems relevant.

If employed, I agree I shall not engage in any outside activity which would involve a material conflict of interest with, or which could affect adversely, Millie's. Whether I am deemed to have violated this term is at the sole discretion of Millie's. If employed, I agree to hold in strictest confidence any information I obtain concerning Millie's, its business operations, customers, and employees/agents and further agree to execute Millie's' non-compete and confidentiality agreements if required to do so.

Applicant Signature	Dated:	