



# APPLICATION FOR EMPLOYMENT

**TO APPLICANT:** We appreciate your interest in our organization and we are interested in your qualifications. A clear understanding of your job related skills and experience would aid us in determining whether your qualifications meet our employment needs. We are an Equal Employment Opportunity Employer. Consideration for employment is based solely on individual qualifications, without regard to race, marital status, religious creed, color, national origin, ancestry, physical handicap, medical condition, sex, sexual orientation, age, or any other protected category recognized by applicable federal, state and local law. This employment application is valid for a three-month period after submission to the company and only for the desired position(s).

EMPLOYEE

Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
Last First M. Initial

Present Address \_\_\_\_\_ Phone Number ( ) \_\_\_\_\_  
Street City Zip

Can you, after employment, submit verification of your legal right to work in the United States? ☐ Yes ☐ No Are you at least 18 years of age? ☐ Yes ☐ No

Were you previously employed by Sephora or an LVMH Company? ☐ Yes ☐ No If yes, when?

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation? ☐ Yes ☐ No

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? ☐ Yes ☐ No If yes, state the nature of the crime(s), when and where convicted, and disposition of the case. (Note: Convictions for marijuana-related offenses that are more than 2 years old need not be listed.)

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

List any relatives working for Sephora:

POSITION

Position(s) Applied For \_\_\_\_\_

Expected Rate of Pay \$ \_\_\_\_\_ per \_\_\_\_\_ Would you work ☐ Full-time (32-40 hours) ☐ Part-time (under 32 hours)

Specify days and hours if part-time \_\_\_\_\_ Days available for work? \_\_\_\_\_

What source referred you to Sephora? \_\_\_\_\_

## LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT.

WORK EXPERIENCE

I	Name of Company	From Month Year	To Month Year	Summarize the Work You Did:	Reason for Leaving:
	Address			Position: _____	
	Phone Number	Starting Salary	Last Salary	Duties:	
	Name of Supervisor				
II	Name of Company	From Month Year	To Month Year	Summarize the Work You Did:	Reason for Leaving:
	Address			Position: _____	
	Phone Number	Starting Salary	Last Salary	Duties:	
	Name of Supervisor				
III	Name of Company	From Month Year	To Month Year	Summarize the Work You Did:	Reason for Leaving:
	Address			Position: _____	
	Phone Number	Starting Salary	Last Salary	Duties:	
	Name of Supervisor				
IV	Name of Company	From Month Year	To Month Year	Summarize the Work You Did:	Reason for Leaving:
	Address			Position: _____	
	Phone Number	Starting Salary	Last Salary	Duties:	
	Name of Supervisor				

May we contact the employers listed above? ☐ Yes ☐ No If no, indicate by # which one(s) you do not wish us to contact \_\_\_\_\_

**SKILLS****OFFICE/CLERICAL****Yes****No**

Typing

☐☐**WPM** \_\_\_\_\_

Computer Hardware

☐☐**Platforms include:** \_\_\_\_\_

Computer Software

☐☐**Programs include:** \_\_\_\_\_

Other skills: \_\_\_\_\_

Many of our customers speak languages other than English. Please list any foreign languages that you understand and designate your ability, for each, to Speak, Read and Write as "Poor," "Fair," or "Fluent."

**Speak****Read****Write**

Are there any other experiences, skills or qualifications which you feel would contribute to the position for which you are applying?

**EDUCATION**

School	Name & Address	Course of Study	Last Year Completed (please circle)	Did you Graduate	Diploma or Degree
HIGH	_____ _____	_____	1   2   3   4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE	_____ _____ Presently Enrolled? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	1   2   3   4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER	_____ _____ Presently Enrolled? <input type="checkbox"/> Yes <input type="checkbox"/> No	_____	1   2   3   4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

**ACTIVITIES**

List job-related honors and activities (including offices held). You may omit those activities or honors which indicate race, religion, creed, color, national origin, ancestry, sex, age, marital status, disability and any other characteristic protected by applicable law.

**REFERENCES**

Name and Occupation	Relationship	Address	Phone Number

Is any additional information relative to change of name, use of an assumed nickname, or nickname necessary to double check on your work record?

☐ Yes ☐ No If yes, please explain. \_\_\_\_\_

If I am employed, I agree to abide by Sephora's rules, regulations, and policies and I agree to receive any pay earned via either Direct Deposit or Pay Card. I also agree to receive my paystub electronically, as permitted by applicable law. I understand that my employment with Sephora will be at will, which means that either I or Sephora may terminate the employment relationship at any time with or without cause and with or without notice. I understand that while Sephora retains the right, in its sole discretion, to modify the terms and conditions of my employment, including my compensation, benefits, title, job duties, work schedule, and reporting relationships, the at-will nature of my employment with Sephora can be changed only if I enter into a written agreement with Sephora signed by me and Sephora's Senior Vice President of Human Resources. This provision constitutes the entire agreement between me and Sephora regarding the duration of my employment, and it supersedes any prior representations, promises, or agreements on the subject.

I certify that the facts set forth in this application for employment are true and complete. I understand that false statements or omissions on this application will result in a refusal to hire or, if discovered after I am hired, in disciplinary action up to and including the termination of my employment.

I hereby grant permission to any person, firm or corporation to release to Sephora or its representatives any and all information regarding my past work or employment and my background. I waive any and all claims I might have with respect to the providing of such information.

I HAVE READ THE ABOVE PRIOR TO SIGNING THIS APPLICATION.

\_\_\_\_\_  
Date of Application\_\_\_\_\_  
Signature of Applicant



## Background Release Form Disclosure & Consent



In connection with my application for employment (including contract for service) with Sephora USA, Inc. ("the Company"), I understand that investigative inquiries may be obtained on me by a consumer reporting agency, and that any such report will be used solely for employment-related purposes. I understand that the nature and scope of this investigation will include a number of sources including, but not limited to, consumer credit, criminal convictions, sex offender registries and public databases, motor vehicle, and other reports. These reports will include information as to my character, general reputation, personal characteristics, mode of living, and work habits. Information relating to my performance and experience, along with reasons for termination of past employment from previous employers, may also be obtained. Further, I understand that the Company will be requesting information from various Federal, State, County and other agencies that maintain records concerning my past activities relating to my driving, credit, criminal, civil, education, and other experiences.

I understand that if the Company hires me, it may request a consumer report or an investigative consumer report about me for employment-related purposes during the course of my employment. I understand that the scope of this investigation will be the same as the scope of a pre-employment investigation, and that the nature of such an investigation will be my continuing suitability for employment, or whether I possess the minimum qualifications necessary for promotion or transfer to another position. I understand that my consent will apply throughout my employment, unless I revoke or cancel my consent by sending a signed letter or statement to the Company at any time, stating that I revoke my consent and no longer allow the Company to obtain consumer or investigative consumer reports about me.

I understand that I am being given a copy of the "Summary of Your Rights Under the Fair Credit Reporting Act" prepared pursuant to 15 U.S.C. Section 1681-1681u. If I am applying for employment in the State of California or if I am a resident of California at the time of applying for employment, a summary of the provisions of California Civil Code section 1786.22 is also being provided to me with this form. This signed Disclosure and Consent form, whether in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Company.

I authorize without reservation any party or agency contacted by the Company to furnish the above-mentioned information. I hereby consent to the Company obtaining the above information from Accurate Background, Inc. (and/or any of their licensed agents) located at 6 Orchard, Suite 200, Lake Forest, CA 92630, (800) 784-3911. I understand that to aid in the proper identification of my file or records, the following personal identifiers, as well as other information, are necessary.

Print Name \_\_\_\_\_

Other Names Known By \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Month/Day of Birth \_\_\_\_/\_\_\_\_

Driver License Number \_\_\_\_\_ State \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Prospective Employer Sephora USA, Inc.

Oklahoma or Minnesota Applicants:

I would like to receive a copy of any report obtained on me by Sephora USA, Inc. ☐ Yes ☐ No

California Applicants:

Accurate Background, Inc. must supply files and information according to applicable law. You may inspect your files or records in person with proper identification, or by making a written request by certified mail or by telephone with proper identification. You may request to receive a copy of any report received by Sephora USA, Inc., except for reports sought due to suspicion of wrongdoing or misconduct by you, by checking the "yes" box. ☐ Yes ☐ No

*Para informacion en espanol, visite [www.ftc.gov/credit](http://www.ftc.gov/credit) o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave., N.W., Washington, D.C. 20580.*

### **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 1-800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 1-202-452-3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 1-800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 1-703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 1-202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 1-202-720-7051

# We Participate in E-Verify



This SWA will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each applicant's Form I-9 to confirm work authorization.

**IMPORTANT:** If the Government cannot confirm that you are authorized to work, this SWA is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

## NOTICE:

**Federal law requires all employers to verify the identity and employment eligibility of all persons hired to work in the United States.**

SWA and employers may not use E-Verify to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

If you believe that your SWA has violated its responsibilities under this program or has discriminated against you during the verification process

based upon your national origin or citizenship status, please call the Office of Special Counsel for Immigration Related Unfair Employment Practices at 1-800-255-7688 (TDD: 1-800-237-2515).

**Employment Verification.**  **Done.**

For more information on E-Verify, please contact DHS at:

**1-888-464-4218**



E-VERIFY IS A SERVICE OF DHS AND SSA



# IF YOU HAVE THE RIGHT TO WORK, Don't let anyone take it away.



**If you have a legal right to work in the United States, there are laws to protect you against discrimination in the workplace.**

**You should know that –**

No employer can deny you a job or fire you because of your national origin.

Unless mandated by law or government contract, employers cannot require you to be a U.S. Citizen or permanent resident or refuse any legally acceptable documents.

If any of these things have happened to you, you may have a valid charge of discrimination that can be filed with the OSC. Contact the OSC for assistance in your own language.

Call 1-800-255-7688. TDD for the hearing impaired is 1-800-237-2515.

In the Washington, D.C., area, please call 202-616-5594, TDD 202-616-5525

Or write to:  
U.S. Department of Justice  
Office of Special Counsel - NYA  
950 Pennsylvania Ave., N.W.  
Washington, DC 20530

**U.S. Department of Justice  
Civil Rights Division**

Office of Special Counsel for  
Immigration-Related Unfair  
Employment Practices

