







## TEST

Use space below to figure problems (do not add tax). Write the answer in the space at the end of the question.

1. A customer picks up two dry cleaning orders. One totals \$14.93 and one totals \$18.67. The customer gives you a fifty-dollar bill. What is the correct change? \_\_\_\_\_
2. A customer has 5 ties dry cleaned at \$1.65 per tie and a pair of ski pants dry cleaned and water repelled at a cost of \$6.40. The customer gives you two ten-dollar bills and 70¢. What is the correct change? \_\_\_\_\_
3. A customer has 6 shirts laundered at 99¢ per shirt. He gives you a ten-dollar bill and 95¢. What is the correct change? \_\_\_\_\_
4. A customer has two three-piece suits dry cleaned at \$9.10 per suit and 4 pants dry cleaned at \$3.20 per pants. The customer gives you two twenty-dollar bills and four quarters. What is the correct change? \_\_\_\_\_
5. A customer wants to buy 16 hangers at 20¢ each and 4 long plastic bags at 20¢ each and 3 short bags at 15¢ each and one lint roller at \$5.00. The customer gives you a twenty-dollar bill. What is the correct change? \_\_\_\_\_

## EMERGENCY CONTACT

Name \_\_\_\_\_ Address \_\_\_\_\_

Relationship \_\_\_\_\_ Phone Number(s) \_\_\_\_\_

## SECURITY

List states and countries of residence for the past seven years \_\_\_\_\_

YES NO

Have you used any names or Social Security Numbers other than given above? If so, please list.

## CERTIFICATION AND RELEASE

I certify that I have read and understand the applicant note on page one of this form and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application, whether on this document or not, may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents to verify any of this information, including consumer reporting bureau reports and Workers Compensation reports. I release all former employers, persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

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

### FOR COUNTER USE ONLY

Person receiving application \_\_\_\_\_ Date received \_\_\_\_\_

Comments \_\_\_\_\_

### FOR OFFICE USE ONLY

Test score \_\_\_\_\_

Interview date \_\_\_\_\_

Interviewed:  Yes  No

Interviewed by \_\_\_\_\_

Comments \_\_\_\_\_

Hired  Yes  No DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Starting Wage \$ \_\_\_\_\_

Date Reporting to Work \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Position: \_\_\_\_\_

Location: \_\_\_\_\_