



## NCPIN THRIFT VOLUNTEER APPLICATION

### APPLICANT INFORMATION

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_

### POSITION APPLYING FOR

Days and Times Available: \_\_\_\_\_

\_\_\_\_\_ **THRIFT STORE** (*circle*) **TUES** am | pm **WED** am | pm **THUR** am | pm **FRI** am | pm **SAT** am | pm

**THRIFT STORE position preference** (*circle*) Cashier | Bagger | Back Room Processing | Restocking

### ABOUT YOU

Please list any physical limitations here: \_\_\_\_\_

Please list any skills or talents: \_\_\_\_\_

Please tell us your reason for choosing NCPIN: \_\_\_\_\_

### DISCLAIMER & SIGNATURE

***I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.***

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

**NCPIN THRIFT SHOP | 434 COLFAX AVE., GRASS VALLEY, CA 95945 | 530.205.9301 | TUE - SAT 10-4**