

BORDERS GROUP

Application for Employment

The Next Exciting Chapter in Your Life.

Borders Group is a leading global retailer of books, music, movies, and more. Throughout our more than 1,200 stores around the world, we constantly find new ways to surprise and delight customers—and turn them into lifelong friends. Our employees worldwide help to provide our customers with the information and entertainment products they love in a relaxing, enjoyable atmosphere.

We are a company committed to our people, to diversity, to our customers, and to our communities.

APPLICANT DATA

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation or any status protected by federal, state or local law.

NAME (Please print your name as it appears on your Social Security card) _____ Date of Application _____

LAST FIRST MIDDLE

ADDRESS

STREET ADDRESS CITY STATE ZIP CODE

PHONE

PRIMARY PHONE NUMBER () ALTERNATE PHONE NUMBER ()
Area Code Area Code

When is the best time to call you? _____ Preferred Phone Number PRIMARY ALTERNATE

EMAIL ADDRESS _____

Are you 18 years or older? YES NO (If you are a minor, can you provide the work certificate necessary to obtain employment?) YES NO

EMPLOYMENT LOCATION

For which Borders Group subsidiary* are you applying to work?

- CORPORATE OFFICE (ANN ARBOR, MI) BORDERS STORES WALDENBOOKS STORES/SEASONAL BUSINESS
 BORDERS EXPRESS STORES BORDERS OUTLET STORES DISTRIBUTION CENTERS
 OTHER _____

POSITION DESIRED

Have you been previously employed at any Borders Group subsidiaries?* YES NO
If yes, which company, when, where, and which position did you hold?

COMPANY _____ WHEN _____ STATE _____ POSITION HELD _____

For which position are you applying? _____

If hired, when would you be available to start working? _____

What is your compensation expectation? \$ _____ Per hour or \$ _____ Per year

WORK SCHEDULE

Please check the type of shifts for which you are available DAYS EVENINGS NIGHTS WEEKENDS ANY

What type of employment are you seeking? FULL-TIME PART-TIME TEMPORARY/SEASONAL ANY

Please indicate below your work availability:

SUNDAY _____ MONDAY _____ TUESDAY _____ WEDNESDAY _____ THURSDAY _____ FRIDAY _____ SATURDAY _____
_____ to _____ _____ to _____ _____ to _____ _____ to _____ _____ to _____ _____ to _____

Note: Many of our businesses are open for business on holidays, weekends, and/or extended business hours for special events, store promotions, inventory, holidays, etc.
Work schedules are based upon the needs of the business, and may be subject to change on a weekly basis.

EDUCATION

	PRINT NAME, CITY AND STATE OF EACH SCHOOL	GRADUATED (Yes or No)	DEGREE AWARDED
HIGH SCHOOL			
COLLEGE/VOCATIONAL			
GRADUATE STUDIES			
OTHER FORMAL EDUCATION			

Other special training/certifications that would enhance your qualifications (Please list) _____

SPECIAL / TECHNICAL SKILLS (Please list the skills you have and, where appropriate, type of program used or speed.)

Computer Software _____

Computer Hardware _____

Store/Office/Distribution Equipment (Please check those which apply.)

PERSONAL COMPUTER/TERMINAL CASH REGISTER RESTAURANT /COMMERCIAL FOOD SERVICE FORKLIFT OPERATION

LANGUAGE

Some stores sell multi-lingual products and serve multi-lingual customers. If you would like to make us aware of any multi-lingual abilities, you may do so here: LANGUAGE _____ (Please check those which apply.) READ SPEAK WRITE

Other Special/Technical Skills: _____

EMPLOYMENT RECORD

How many different employers have you worked for in the past five (5) years? _____

Do you have experience working in a retail environment? YES NO

Do you have experience working in a distribution center or warehouse? YES NO

Have you ever been involuntarily terminated from any place of employment? YES NO

If yes, please explain all occurrences _____

If currently employed, may we contact your current employer? YES NO

May we contact your former employers? YES NO

In order to verify previous employment experience and education, please state other names under which you have worked and/or attended school _____

EMPLOYMENT RECORD *continued*

List your current or most recent employer first. Include military service and/or any periods of self-employment. If applicable, please account for your (3) most recent employers.

PRESENT OR LAST EMPLOYER

COMPANY _____ DATES EMPLOYED: From _____ To _____
ADDRESS _____
SUPERVISOR'S NAME _____ PHONE NUMBER () _____
STARTING JOB TITLE _____ STARTING WAGE _____
ENDING JOB TITLE _____ ENDING WAGE _____
Specific reason for leaving _____
What did you like best about this position? _____
What did you like least about this position? _____

EMPLOYER #2

COMPANY _____ DATES EMPLOYED: From _____ To _____
ADDRESS _____
SUPERVISOR'S NAME _____ PHONE NUMBER () _____
STARTING JOB TITLE _____ STARTING WAGE _____
ENDING JOB TITLE _____ ENDING WAGE _____
Specific reason for leaving _____
What did you like best about this position? _____
What did you like least about this position? _____

EMPLOYER #3

COMPANY _____ DATES EMPLOYED: From _____ To _____
ADDRESS _____
SUPERVISOR'S NAME _____ PHONE NUMBER () _____
STARTING JOB TITLE _____ STARTING WAGE _____
ENDING JOB TITLE _____ ENDING WAGE _____
Specific reason for leaving _____
What did you like best about this position? _____
What did you like least about this position? _____

PERIODS OF UNEMPLOYMENT OVER THE PAST 3 YEARS

DATES: From _____ To _____ Specific reason _____
DATES: From _____ To _____ Specific reason _____
DATES: From _____ To _____ Specific reason _____

REFERENCES

Please give the names of two work-related references we may contact. Please do not list relatives. School or volunteer-related references may be listed.

1. NAME _____ PHONE NUMBER () _____
ADDRESS _____ HOW ACQUAINTED _____
2. NAME _____ PHONE NUMBER () _____
ADDRESS _____ HOW ACQUAINTED _____

Please give the names of two persons, not relatives, who have known you for five (5) years or more. School or volunteer-related references may be listed.

1. NAME _____ PHONE NUMBER () _____
ADDRESS _____ HOW ACQUAINTED _____
2. NAME _____ PHONE NUMBER () _____
ADDRESS _____ HOW ACQUAINTED _____

OTHER INFORMATION

APPLICANT NAME _____

Borders Group and subsidiaries* have an Employment of Relatives policy that places some restrictions on the employment of relatives. To ensure that we do not place employees in positions that would violate this policy, please give the names and relationships of persons to whom you are related and who are employed at the location at which you are applying. (If you live in California, do not answer.)

NAME & RELATIONSHIP _____

NAME & RELATIONSHIP _____

How did you find out about employment opportunities at this location?

- WEBSITE IN-STORE SIGNAGE NEWSPAPER PROFESSIONAL ORGANIZATION EMPLOYEE WALK-IN
 AGENCY RADIO CAREER FAIR COLLEGE RECRUITING NETWORKING OPEN HOUSE
 EMPLOYEE REFERRAL _____
 OTHER _____

Are you able at the time of employment, to submit verification of your legal right to work in the U.S.? YES NO

(Verification and completion of Form I-9 must be submitted no later than three business days after hire.)

Applicant: Please complete only the section that applies to the state in which you are seeking employment.

- Applicant in all states EXCEPT California, Connecticut, Hawaii, Massachusetts, Washington

Have you ever been convicted of a felony? YES NO

Note: This question does not apply to convictions that have been expunged, sealed, pardoned, or otherwise exonerated or eradicated. (A conviction record will not necessarily be a bar to employment. A conviction which is substantially related to the functions or qualifications of the position(s) for which you are applying may be taken into consideration.)

If "yes," please describe fully the criminal convictions(s), listing the nature of the offense(s) and your rehabilitation since the conviction(s):

APPLICANT SIGNATURE _____

DATE _____

APPLICANT'S STATEMENT**Please read the following statement carefully.**

I understand that this application is not a contract, offer or promise of employment. By filling out this application I am genuinely interested in working for Borders Group, Inc. and subsidiaries (Borders Group) and I understand that an offer of employment may be subject to receipt of satisfactory reports and the accuracy of all pre-employment information I have supplied. I acknowledge that my employment with Borders Group is on an at-will basis. I am free to terminate my employment with Borders Group at any time for any reason. Similarly, Borders Group is free to terminate our employment relationship at any time, with notice, with or without cause. Acceptance of employment is not a contract of employment for any specified time.

If employed, I will be required to abide by the company's rules and regulations, consistent with the applicable federal, state and local law. I understand that the company has complete discretion to modify its policies, rules, regulations and practices at any time, to the extent allowed by federal or state law, except that it will not modify its policy of employment at-will. By my continued employment with the company, I consent to any changes.

I hereby authorize Borders Group or its agents to verify all statements contained in this application and/or resume to the extent permitted by federal state or local law. (Federal law and some state law require a separate disclosure and consent form when obtaining consumer credit reports.) To the extent permitted by federal, state or local law, I release all parties from any liability arising out of this provision and the use of such information.

I certify that the above information is complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation or omission of information on this form relating to my application of employment may result in my denial of employment, or if employed, my immediate dismissal.

I understand that neither this document, nor any other document or letters received by me during my employment with Borders Group Inc. nor any offer of employment from Borders Group Inc., nor any statement made by a Borders Group agent or representative constitute an employment contract, unless agreed to in a specific document to that effect by Borders Group and me in writing.

APPLICANT SIGNATURE _____

DATE _____

Borders Group supports the individuality of each employee and encourages all those who wish to grow to explore their talents and seek expanded opportunities. This deeply rooted enthusiasm for diversity of people and perspectives reaches from our corporate office into our stores, distribution centers, and every community we serve around the world.