



Application for Employment

Name _____

Date _____

Address _____

Home Phone _____

City _____ State _____ Zip _____

Mobile Phone _____

Are you 16 years or older? Yes No Date you are available to start _____

Are you currently employed? Yes No May we contact your current employer? Yes No

Education

	Name & Location	Current Grade	Subjects Studied
High School			
College/Higher Education			

General Information

Special Interests, Studies, Hobbies, Work Skills, etc.

Previous Employment

Dates Employed	Name & Address of Employer	Ending Wage	Reason for Leaving
From: To:			
From: To:			
From: To:			

Personal References

Name	Phone number	Relationship	Years Known

Please answer all the following questions:

What extra-curricular sports activities are you involved in?

- | | | | | | |
|------------|--------------------------|-----------|--------------------------|-----------|--------------------------|
| Basketball | <input type="checkbox"/> | Soccer | <input type="checkbox"/> | Golf | <input type="checkbox"/> |
| Baseball | <input type="checkbox"/> | Track | <input type="checkbox"/> | Wrestling | <input type="checkbox"/> |
| Football | <input type="checkbox"/> | X Country | <input type="checkbox"/> | Other | _____ |
| Volleyball | <input type="checkbox"/> | Tennis | <input type="checkbox"/> | Other | _____ |

What about Theater or Music?

- Plays Musicals Choir Band

Are you involved with any other activities? _____

Are you available to work school nights until 9:30pm? (Usually only 1 - 2 per week)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you usually available weekend days?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you usually available weekend nights?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you available any <u>weekdays</u> between <u>10am & 5pm</u> during the school year?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you interested in working our kitchen area? (Food prep, sandwich assembly, cleaning & organizing kitchen area, planning ahead for next day's needs etc.)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Are you interested in working the front counter area? (Taking food & ice cream orders, customer service, serving ice cream, cleaning dining room area)	Yes <input type="checkbox"/> No <input type="checkbox"/>

How many **hours per week** are you interested in? _____ **Starting Wage Desired - \$** _____

Authorization

"I hereby certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information. This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

Date _____ Signature _____

For your privacy, please return this application in a sealed envelope